



Bilingual Child Academy Enrollment Forms

Date of Enrollment: _____

Desired Start Date: _____

Deposit: _____

Admission Information

Child's Full Name	Date of Birth	Sex: Male ___ Female ___
Home Address	City	Zip
Phone Number	Child's Home Primary Language	
1st) Parent/Guardian's Name	Mobile Number	
Email	Employer	
2nd) Parent/Guardian's Name	Mobile Number	
Email	Employer	

Please list Name, Relationship, Address, and Telephone Number of Person(s) to reach in case of Emergency where parents/guardians cannot be reached

<p>Name:</p> <p>Relationship to Child:</p> <p>Address:</p> <p>Telephone: ()</p> <p>Does this person have authority to pickup child? Yes / No</p>	<p>Name:</p> <p>Relationship to Child:</p> <p>Address:</p> <p>Telephone: ()</p> <p>Does this person have authority to pickup child? Yes / No</p>
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I hereby authorize Bilingual Child Academy to allow my child to leave the facility ONLY with the following persons. Please list name and telephone number(s) for each. Children will only be released to a parent or a person designated by the parent/guardian after verification of ID.

<p>Name:</p> <p>Relationship:</p> <p>Telephone:</p>	<p>Name:</p> <p>Relationship:</p> <p>Telephone:</p>	<p>Name:</p> <p>Relationship:</p> <p>Telephone:</p>
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I acknowledge the receipt of the Parent Handbook

Can view online on the website bilingualchildacademy.com

I require a hardcopy

Parent/Guardian Signature	Date:
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Bilingual Child Academy Enrollment Forms

Child's Name: _____

Authorizations

AUTHORIZATION FOR MEDICAL ATTENTION		
<p>In the event I or an emergency contact cannot be reached, or arrive in a timely manner, I authorize BCA to transport my child to the nearest medical facility at: North Central Baptist Hospital - 520 Madison Oak Dr. Phone: (210) 297-4000, or call 9-1-1</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
Name of Child's Physician or Practice	Phone Number	Address
CHECK ALL THAT APPLY		
<p>I hereby authorize BCA to obtain all necessary emergency care for my child by school staff/medical staff including CPR/First Aid.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Signature: _____</p>		
<p>I hereby authorize BCA to transport my child for:</p> <p><input type="checkbox"/> Emergency Care <input type="checkbox"/> Field Trips (with prior notification)</p>		
<p>I understand that BCA has video cameras in the classrooms with DVR recording, can only be viewed by administration or registered families with permission from the administration.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Signature: _____</p>		
<p>I hereby give consent for images of my child such as photos (<i>without name or personal information</i>) to be posted on classroom bulletin boards, used for classroom activities, or possibly used for promotional material, Facebook.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Signature: _____</p>		
<p>I understand that meals may be provided for my child throughout the day, and that I can provide personal food from home. BCA is not responsible for the nutritional value of food brought from home. (Meals provided: Breakfast, Lunch, Snacks)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Signature: _____</p>		
<p>I authorize my child to play in supervised water activities which may include a water table or sprinkler play.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No [BCA does not have a swimming pool] Signature: _____</p>		
<p>I understand that Bilingual Child Academy is a group care facility and CANNOT provide One-on-One care for any child.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No Signature: _____</p>		
<p style="text-align: center;"><i>Please list all known allergies, dietary needs, illnesses (previous & existing), or injuries within the past 12 months which may affect participation in school related activities, and which your caregiver should be made aware of:</i></p>		
<p><input type="checkbox"/> None that we are aware of</p>		
<p>I understand that if my child has a diagnosed <u>allergy</u>, we must provide a Physician Allergy Emergency Plan.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>I give consent for the facility to secure any and all necessary emergency medical care for my child, and agree to above authorizations:</p>	<p>Parent/Guardian Signature: _____</p> <p>Date: _____</p>	
<p>I understand that Bilingual Child Academy does not become involved in custody disputes. If there is a challenge to any article in this enrollment paperwork by another custodial parent, court documentation will be required. If disputes continues, BCA has the right to terminate services.</p>	<p>Parent/Guardian Signature: _____</p> <p>Date: _____</p>	



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Child's Name: _____

Medical Requirements

BEFORE being admitted into group care, you must provide the following medical information to BCA as applicable for child:

I have provided my child's current immunization schedule, and will keep the center records updated each time my child receives new vaccinations.
 Yes No Signature: _____

I understand that BCA requires all children to be current on their vaccination schedule. In order to protect the health of all children, BCA does not accept un-vaccinated children.
 Yes No Signature: _____

At the age of four, or admission into the Pre-K program, I must provide a medical Hearing & Vision Screening as required by the state DFPS Minimum Standards and the Special Senses & Communications Act.
 Yes No Signature: _____

I affirm that my child has been checked by a doctor within the past year, is in good health, and can participate in group care. Within 6 months I must provide a Health Care Professional Statement from child's doctor, which confirms last date of well check.
 Yes No Signature: _____ Date: _____

A signed and dated copy of the Health Care Professional Statement / Child's Physical with clearance is attached

Children enrolled in an Elementary School:
 School Name: _____ Phone Number: _____

Health-Care Professional Statement

Child's Name: _____ Date of Exam: _____

Physician's Statement: "I have examined the above named child, and find he/she is in good health and can participate in a childcare / preschool program without limitations."

Dr. Name - Physician Signature / Medical Practice Stamp	Phone Number	Address

Hearing & Vision Screening - applicable for children 4 yrs of age and older or in Pre-K program

Vision	Right 20 / _____	Left 20 / _____	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Hearing Right	<u>1000 Hz</u>	<u>2000 Hz</u>	<u>4000 Hz</u>
Left			<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Medical Practice performing Exam / Dr. Signature	Phone Number	Address	



Bilingual Child Academy Enrollment Forms

Family Name: _____

Tuition & Payment Policies

Guardian or "Parent", _____ of Student, _____ herein called "Student", and "Parent" signifies the Parents or Guardians responsible for Student. Upon execution and submission of enrollment forms, and the non-refundable registration fees, the student is accepted and enrolled at Bilingual Child Academy. Parent incurs obligation and the Parent shall owe the tuition for the entire time enrolled as services are rendered to Child. The School is entitled to be reimbursed for any attorney's fees and costs incurred in the collection of any unpaid balance.

Tuition is due payable BEFORE services are rendered by Parent . Early payments will be accepted. Payment plans are available; please see the office for payment plan eligibility. BCA accepts ACH, cash, checks, and all major credit cards.

Late Payment fee may be assessed three (3) days after due date. To prevent any late payment fees, BCA recommends to keep an ACH account or credit card on file. All credit information is secure and private. You may also log in to the BCA Parent Portal to make payments online. Follow the link on the home page of our website for the Parent Portal login.

BCA reserves the right to un-enroll a Student or Parent/Family. At which time Parent will not be responsible for services NOT rendered, however maintains responsibility for service that were rendered.

Return Checks Policy

A \$35 processing fee will be charged for any returned checks. After this we will ask that you pay with cash or money order. Failure to reconcile returned items will result in late fees as well as possible delinquent account status.

Delinquent Accounts

If accounts are two weeks or more delinquent, the Center Director has the right to discontinue services. All unpaid accounts will be turned over to a collection agency. Parents will be notified prior to this procedure. Any balances left unsettled will be sent to a Collections Agency after 30 days.

Withdrawal Policy

If a family decides to withdraw from the program, a two weeks notice is required . Any parent failing to do so, will be charged their normal tuition rate for two weeks. All balances will be sent to Collections after 30 days of the last day the child attends the program.

Vacations, Holidays, or Absences

- BCA is a year-around program. When you enroll you are making a commitment to pay your normal tuition regardless of time of year. We do not close for Summer, the regular program continues year-around.
- You must continue to pay your normal tuition during holidays or other school closures. Please see our yearly calendar for closed days and plan appropriately.
- The center allows a 50% discount for 2 weeks vacation, during your anniversary year (after 6 months of active enrollment). You must notify the office a week in advance.
- If you plan to leave for an extended period of time, and you have given a two weeks notice, you will have to repay the \$150 Registration Fee and 2 weeks deposit in order to re-enroll.
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Late Pickup Fees

Families may incur a \$10.00 + \$2.00 per minute (to your account) for late-pickups after center closing time. Frequent late pickups may result in dismissal from program.

I, the "Parent", am the person responsible party for all tuitions and fees incurred by my child at the Bilingual Child Academy, and I understand the above Tuition & Payment policies.

Printed Name: _____ Family Name: _____

Driver's License #: _____ State: _____

Signature: _____ Date Signed: _____

Full Address: _____ City: _____ Zip: _____



Bilingual Child Academy Enrollment Forms

Discipline, Guidance, & Behavior Policy

We believe that children need limits in order to feel secure about themselves and their environment. The purpose of discipline & guidance is to help children learn acceptable behavior and develop self control. The basis for our Discipline Policy is an organized classroom and prepared staff members. At BILINGUAL CHILD ACADEMY we strive to develop a positive relationship between the teacher and the child. We also believe that if an interesting and challenging program is offered to the child, then discipline problems are at a minimum. If inappropriate behavior does occur, we begin with a positive approach.

Discipline and Guidance Policy for The Bilingual Child Academy

Discipline must be:

- (1) Individualized and consistent for each child;
- (2) Appropriate to the child's level of understanding; and
- (3) Directed toward teaching the child acceptable behavior and self-control.

A caregiver may only use positive methods of discipline and guidance that encourage self-esteem, self-control, and self-direction, which include at least the following:

- (1) Using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
- (2) Reminding a child of behavior expectations daily by using clear, positive statements;
- (3) Redirecting behavior using positive statements; and
- (4) Using brief supervised separation or time out from the group, when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age.

There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited:

- (1) Corporal punishment or threats of corporal punishment;
- (2) Punishment associated with food, naps, or toilet training;
- (3) Pinching, shaking, or biting a child;
- (4) Hitting a child with a hand or instrument;
- (5) Putting anything in or on a child's mouth;
- (6) Humiliating, ridiculing, rejecting, or yelling at a child;
- (7) Subjecting a child to harsh, abusive, or profane language;
- (8) Placing a child in a locked or dark room, bathroom, or closet with the door closed; and
- (9) Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age.

From: Texas Administrative Code, Title 40, Chapters 746 and 747, Subchapters L, Discipline and Guidance

The following is considered unacceptable behavior by children:

- | | |
|--------------------------------------|--|
| Running / Screaming in the classroom | Leaving the area or group without permission |
| Becoming disruptive | Removing shoes or other articles of clothing |
| Throwing classroom furniture/toys | Using toys and materials inappropriately |
| Aggressive behavior | Biting |
| Abusive, or inappropriate language | Arguing with teachers or other children excessively |
| Lack of Cooperation | Behavior determined by the director to be unacceptable |
| Hurting their teacher | Spitting out food when older than infant/toddler |
| Hurting themselves or others | |

Infants & Young Toddlers are often an exceptions to many of these behaviors since they are in a stage of growth and development which prevents them from understanding right & wrong conduct. However even two year olds are expected to demonstrate appropriate behavior for their age.

The teacher has these prime responsibilities when dealing with inappropriate behavior:

- ✓ Redirection - Encourage child's good behavior and/or redirect his or her activity each time he/she misbehaves in a consistent manner.
- ✓ Removal from situation which is causing behavior
- ✓ Spend time in the "Safe Place" - Teacher cannot provide One-on-One care to child for more than 5 minutes.
- ✓ The teacher will try to help the child identify his/her unacceptable behavior and possible alternatives and understand consequences.

If the child continues the inappropriate behavior, and/or the teaching strategies are ineffective, the administration may call parents to pick-up child for the day. If the child's negative or disruptive behavior doesn't improve, the administration may deem it necessary to terminate services.

BILINGUAL CHILD ACADEMY expects parental involvement and cooperation in all aspects of discipline. Failure to comply can warrant termination. We reserve the right to discontinue service for any child/parent whose needs we cannot meet. The key to effective discipline is consistency. We try to be as consistent as possible in all areas. We provide the child with a warm and loving atmosphere in which to grow and learn.

I understand the outlined Discipline & Guidance policies	Parent/Guardian Signature:
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Bilingual Child Academy Enrollment Forms

Biting Policy

Biting is a common and possibly developmentally appropriate behavior in very young children for a short time period [especially from 12 months - 2 yrs.]. Generally children over the age of 3 have developed more appropriate ways to communicate. Experts in the field of child development report that biting occurs chiefly as a result of a child's incapacity to communicate. Children may become upset and frustrated by a new experience, and may bite as a response. While biting during the toddler years is developmentally appropriate, it is upsetting to parents and caregivers when it occurs, the goal is to replace the child's undesirable behavior with more effective way of communication and to ensure the health and safety of everyone in our program. The following is a plan of our preemptive strategies:

- o For infants and young toddlers, positive teething activities will be provided to comfort and soothe their gums.
- o When children bite out of frustration or anger, behavior will be redirected to some other activity and/or will be shown an alternate way to communicate what they want. We will encourage the use of language to express wants and needs.
- o Parents will be notified if their child is bitten at school. However in order to protect the privacy of all our families, parents will not be informed of the biter.
- o If a child bites frequently, staff will utilize a more intensive approach, which involves carefully observing the child to determine precipitating events and maintaining a log to help track the behavior. Conferences with parents may also be utilized to discuss the child's actions at home, search for outside resources, etc.
- o Biting incidents will be communicated to the parents of the biter to ensure staff and parents are working together to understand and prevent this behavior.

In order to ensure the safety of all children, and if all attempts to stop chronic biting fails, BCA reserves the right to remove the biting child from the program without notice. There is no magic number of bites that must occur before removal. Each biting situation and child is unique. As such, the administration will evaluate each occurrence with the intent to keep children enrolled for as long as possible.

<i>I understand the outlined Biting Policy</i>	Parent/Guardian Signature:
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Family & Parent Communication Guidelines

Communications between school and home are done primarily through:

- Daily reports received electronically to primary parent's email through our App / Parent portal,
- Direct Emails from school or teacher;
- Text messages;
- Verbally - although not documented in child's portfolio, if a teacher/administrator communicates any concerns directly to parents, this is considered an acceptable form of communication. If a behavior concern arises and is verbally communicated, parents should consider this as a formal warning of concern.

- ✓ Drop-off and Pick-up times are NOT Teacher Conference times. Please understand that teachers are engaged with the supervision of the entire class. Quick conversations are appropriate in order to communicate important information for the day. For in-depth conversations, please speak to an office administrator.
- ✓ At times, the child's parents or the school administration, may request a formal conference. Conferences between parent and school staff are expected to remain positive with the intent to improve the child's behavior and/or educational expectations.
- ✓ If at any time the PARENT or Guardian becomes irate, abusive, uses language/gestures unbecoming of BCA families' and/or threatens BCA staff, then Bilingual Child Academy reserves the right to ask adult to leave premises, with termination of services without notice.
- ✓ BCA would like to remind parents that every program and center is different. Although we strive to meet every families' needs, we understand that our center may not be a "fit" for everyone. If the vision for your child's education is different than that of BCA, we highly recommend you speak to a center Director. If we cannot come to an understanding, it is best to keep in mind that another center may be a better fit for your family.

Parents agree to keep contact information: Address, email and cell phone numbers current with our center in order to stay connected.

<i>I understand the outlined Parent Communication Guidelines</i>	Parent/Guardian Signature:
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Bilingual Child Academy Enrollment Forms

HEALTH & ILLNESS POLICY

Please review the Communicable Disease Policy and sign.

BILINGUAL CHILD ACADEMY is a VACCINE ONLY facility. As a private business we have a right to uphold our policy which dictates all children at the center must be current on their vaccination schedule. This is to minimize the exposure of vaccine preventable diseases in the most vulnerable groups. In order to protect your child and other children, BCA families are expected to follow these guidelines on illness & health for each child.

BCA cannot keep a child in school if he/she has one or more of the following:

1. FEVER, DEFINED AS ANY AUXILIARY TEMPERATURE OF 101 DEGREES FAHRENHEIT OR ABOVE. A child sent home with a temperature of 101 or over must remain out of school until their temperature has remained normal (98.6) for 24 hours WITHOUT TYLENOL OR OTHER MEDICATION.
 2. VOMITING. We will consider vomiting contagious and your child will be sent home after one occurrence. We require a Doctor's release or your child to have no more vomiting for 24 hours for them to return to school.
 3. CONJUNCTIVITIS (EYE INFECTION/ PINK EYE). We will consider ALL eye drainage contagious unless otherwise diagnosed by a physician. A child with a contagious eye infection must be on medication for 24 hours before he/she can return to school.
 4. BRONCHITIS (TEMPERATURE PLUS DRY COUGH). A child with symptoms of Bronchitis should see their Doctor and obtain a written release before returning to school.
 5. SEVERE COLD (GREEN, RUNNY NOSE AND/OR WET COUGH). We will accept a child who has a clear runny nose without a fever, without Tylenol or other medication, without cough, and without other cold symptoms: but once the cold proceeds to the green runny nose stage your child can no longer be at the school. Your child may not return to the school until they no longer have a green runny nose or wet cough and their temperature is normal.
 6. IMPETIGO OF THE SKIN (SKIN INFECTION). Needs Doctor's release to return.
 7. RASHES (THAT HAVE NOT BEEN DIAGNOSED). Needs Doctor's release in order to attend school.
 8. SEVERE DIARRHEA (WATERY, GREENISH, STINKY BOWEL MOVEMENTS). If your child has 3 loose, diarrhea stools you will be called to pick up your child. Their stools need to be normal for 24 hours before they return.
- Note: Children on antibiotics are an exception. - If we send your child home with loose stools and your child returns the very next day, we will send your child home after one loose stool.
9. EAR & THROAT INFECTIONS. If we suspect your child to have an ear and/or throat infection symptoms would include tugging at the ear or difficulty swallowing. We will ask you to take your child to the Doctor for diagnosis. If an infection is diagnosed we will need a release from your Doctor before your child can return or 24 hours after medication has begun.
 10. HEAD LICE. Although not a communicable disease, they do spread quickly in group care; Child may return to school when they are nit-free.
 11. ANY CONTAGIOUS CHILDHOOD DISEASE BEFORE IT HAS COMPLETED ITS ISOLATION PERIOD
 - * HAND FOOT & MOUTH DISEASE – School policy excludes children from school while sores are present. Blister like sores may be present in the mouth, hands and bottom of feet.
 - * MEASLES – 4 days after rash appears
 - * STREP THROAT – 48 hours after treatment has begun or Dr.'s release.
 - * CHICKEN POX – Blisters must be dry, scabbed over.

12. OTHER UNFORESEEN ILLNESS (not listed)

- * If a child displays any of these symptoms throughout the school day, Parents will be called and must pickup within 1 hr.
- * Child cannot return to school the next day for 24 hours unless they have a Doctor's release

Before returning your child to our school, you will need to provide either of the following:

- * a written Dr.'s release with date child can return to school.
- * a normal temperature (98.6) for 24 hours without Tylenol or other medication.
- * have normal bowel movements for 24 hours.
- * clear or no nasal drainage
- * cough is within reason or controllable with medication.

Thank you for your cooperation in helping us keep all of the children and staff healthy.

I understand the outlined Health & Illness Policy	Parent/Guardian Signature:
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Bilingual Child Academy Enrollment Forms

CHILD CARE WAIVER

Name of Student 1: _____ DOB: _____

Name of Student 2: _____ DOB: _____

Name of Student 3: _____ DOB: _____

I/We understand the content as described in the provided BCA Parent & Student Handbook as well as the Enrollment Paperwork. I/We understand that periodically the handbook may be updated. In which case we will be notified via email and the new handbook will be available on the school website and via email as a PDF link and we are responsible to read through new updates. I may request a hard copy of the handbook printed at any time from the office.

*I/We, the undersigned, are the parent(s)/guardian(s) of the above named child/children and we agree, in taking advantage of the child care service provided by Bilingual Child Academy [BCA], to release and hold harmless Bilingual Child Academy, its officers, agents, and employees, from any and all claims, demands, suits, costs, and charges, in connection with or arising out of the child care service, including, but not limited to, bodily harm or injury to our child; **except** only for loss, harms or injury occasioned by gross negligence or intentional misconduct by BCA and/or its officers, agents, and employees. I/We authorize BCA to administer, or cause to be administered, at my/our sole cost and expense, medical treatment and/or medication to the above name child/children in the event of any emergency.*

In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize BCA or person in charge to take my child to the nearest emergency room, and I give my consent for any and all treatment for my child when the child is in the care of a physician.

Printed Name of Parent/ Legal Guardian: _____

Signature of Parent or Guardian: _____ Date: _____

****** End of Enrollment Forms ******
Thank you for choosing Bilingual Child Academy