



ENROLLMENT PACKET

Garcia Street Club, Inc.

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Santa Fe, NM 87505

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Accredited by the National Association for the Education of Young Children License #4752

ENROLLMENT CHECKLIST FOR APPLICANTS:

Please note that new children are accepted to GSC on a first-come, first-served basis, and **only after all the following requirements have been received:**

- \$200 Registration fee
- \$50 Mat fee
- Registration Information
- Parent Contract
- Enrollment Form
- Local Emergency Contacts & Authorized Pick-ups
- Emergency/Medical Information
- Health Evaluation Form
- Copy of Immunization Record or Exemption
- Policy Checklist
- Photo Release Form
- Physician's Form
- Completed Enrollment Checklist for applicants

Child's Name: _____ **DOB:** _____

REGISTRATION INFORMATION

My child's first day of attendance at GSC will be: _____

I would like to enroll my child in the following Preschool Program (8:00am – 4:00pm):

****PART-TIME ONLY: Please circle the days your child will be enrolled****

Toddlers 1-2 years old

- 5 days/wk: M – F **\$1271**
 4 days/wk: M T W Th F **\$1156**
 3 days/wk: M T W Th F **\$968**
 2 days/wk: M T W Th F **\$660**

Preschoolers 3-5 years old

- 5 days/wk: M – F **\$1135**
 4 days/wk: M T W Th F **\$1038**
 3 days/wk: M T W Th F **\$873**
 2 days/wk: M T W Th F **\$598**

Aftercare will not be offered at this time.

All children are required to be at school by 9:00 a.m. each morning, unless prior approval has been given by the main office or the child's teacher.

I give permission for the following:

- My child may participate in walking field trips.
 My child may participate in hot weather water play.
 Our family's phone number and email address may be shared on a shared file with the school.

Signature of Parent(s) or Guardian(s):

Name: _____ Date: _____

Name: _____ Date: _____

Child's Name: _____ DOB: _____

PARENT CONTRACT

I would like to enroll my child in the following Program (8:00am – 4:00pm):

- 5 days/wk: M – F
- 4 days/wk: M T W Th F
- 3 days/wk: M T W Th F
- 2 days/wk: M T W Th F

I agree to provide a \$200 non-refundable registration fee to enroll my child at GSC. This fee holds my child's spot until their start date regardless of delayed start date or disenrollment prior to attendance.

I agree that if I wish to withdraw my child from the school, I will provide the Director with advanced notice of at least 30 days by completing a 30-day written withdrawal notice and tuition will be charged accordingly.

If my child's tuition is subsidized through NMECECD, I agree to pay my monthly co-pay and tuition for any time my contract does not cover.

I agree to pay my child's tuition by the 1st of each month. After the 1st of the month, tuition will be considered late, and I will be required to pay a late fee of \$65. Tuition that is past due for two consecutive weeks will result in dismissal of the child from the Center, unless prior arrangements are made with the Director. Re-enrollment will require the full registration fee of \$200. I understand that I may request an alternate plan if my family has unusual circumstances, and the Directors and Board of Directors will consider such a request.

I agree that my tuition holds a space for my child at GSC. Therefore, I agree to pay full tuition regardless of absence, illness, holidays, breaks, vacations, emergency closings, or snow days. I understand that it is not possible to switch days.

I understand that my child may be dismissed for the following reasons:

1. Unpaid tuition exceeding 2 weeks without prior written arrangements with the Director.
2. Absence exceeding 2 weeks without payment or prior written agreement with the Director.
3. Other reasons, as outlined in the GSC Parent Handbook.

I have read and agree to all the provisions and terms of the GSC Parent Handbook.

Person(s) responsible for payment (Please print) _____

Signature of parent/guardian: _____ **Date:** _____

Signature of Director: _____ **Date:** _____

Child's Name: _____ **DOB:** _____

ENROLLMENT FORM

Parents/Guardians/Legal Guardian (a person who is legally responsible for the care and well being of a child):

1. Parent name: _____

Email address: _____

Home address: _____

Phone: _____

Employer's Name and Address: _____

2. Parent name: _____

Email address: _____

Home address: _____

Phone: _____

Employer's Name and Address: _____

Do you owe tuition to any other childcare or preschool program or home day care?

No

Yes

If yes, please explain below or speak to the Director immediately as enrollment may be delayed pending an explanation and/or credit check.

Child's Name: _____ **DOB:** _____

LOCAL EMERGENCY CONTACTS & PERSONS AUTHORIZED TO PICK UP YOUR CHILD

Please list 4 persons in the local area (other than parents or guardians) *who can be contacted in case of an emergency and are authorized to pick up your child:*

Name: _____ Relationship: _____

Phone numbers: _____

Name: _____ Relationship: _____

Phone numbers: _____

Name: _____ Relationship: _____

Phone numbers: _____

Name: _____ Relationship: _____

Phone numbers: _____

Additional authorized pick-ups, family members, etc. may be added through Brightwheel and must provide proof of identification to the front office prior to picking up for the first time.

Child's Name: _____ DOB: _____

EMERGENCY/MEDICAL INFORMATION

In case of an emergency, I authorize permission for emergency medical transportation and authorize permission for emergency medical treatment.

- Yes
- No

Signature of parent/legal guardian: _____

Date: _____

Please list the name, address and telephone of your child's physician:

Please list any allergies, chronic condition(s), illness or special needs (including dietary restrictions):

MEDICATION AUTHORIZATION

This form authorizes Garcia Street Club staff to administer sunscreen, lotions, lip balm, etc. to your child.

I _____, hereby authorize Garcia Street Club (Parent or Guardian) to administer sunscreen, lotions, lip balm, etc. to my child.

Prescription & nonprescription medications require a medication-specific authorization form to be completed on an as-needed-basis.

I waive any claim against Garcia Street Club for the administration of the above listed.

Signature of parent or guardian: _____

Date: _____

Child's Name: _____ DOB: _____

HEALTH EVALUATION FORM

This section to be completed by PARENT or GUARDIAN:

Physician's name: _____ Phone: _____

A copy of my child's most recent immunization records have been provided via email or hard-copy.

Past Medical History:

Has your child ever been seriously ill? Yes No

If yes, please explain: _____

Has your child ever had an operation? Yes No

If yes, please explain: _____

Has your child ever had a serious accident? Yes No

If yes, please explain: _____

My child has had the following illness(es): (please circle all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Chickenpox | <input type="checkbox"/> Mumps | <input type="checkbox"/> Whooping Cough |
| <input type="checkbox"/> Measles (Red or German) | <input type="checkbox"/> Poliomyelitis | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Pneumonia | <input type="checkbox"/> Rheumatic Fever | <input type="checkbox"/> Tuberculosis |
| | <input type="checkbox"/> Scarlet fever | <input type="checkbox"/> Auto-immune disease |

Please explain: _____

Health Insurance Coverage:

This information may be required in non-life-threatening emergencies.

Name of Carrier: _____

Policy Number: _____

Name of Insured: _____

Parent signature: _____ Date: _____

Child's Name: _____ DOB: _____

POLICY CHECKLIST

Please review the following important policies and procedures and initial to indicate acceptance.

1. Arrival and Departure

I have read the policies in the Parent Handbook regarding Arrival and Departure and agree to the following:

_____ School hours are 8:00 to 4:00. Children MUST arrive by 9:00 am.

_____ Children MUST be picked up by 4:00 pm.

_____ Children must be signed in/out on each day they attend via Brightwheel.

_____ A late fee of \$5 for the first 5 minutes and \$2.50/minute thereafter will be charged if children are picked up after 4:00 (or 12:00 p.m. on in-service dates).

2. Meals

I have read the policies in the Parent Handbook regarding meals and agree to the following:

_____ Breakfast is served at 8:30 and ends at 9:00.

_____ If my child arrives after 9:00 am, I understand that he or she will miss breakfast.

_____ I understand that GSC provides breakfast and afternoon snack and that I am responsible for providing lunch.

_____ If my child has any allergies or I prefer for them to have a specific diet, I agree to provide alternative foods.

3. Tuition and Enrollment

I have read the policies in the Parent Handbook and Parent Contract regarding tuition and agree to the following:

_____ Tuition is due on or before the first of each month. I agree to pay a late fee of \$65 if tuition is not paid on time.

_____ I will provide the Director with a written 30-day notification if I decide to withdraw my child. If I do not provide a 30-day notice, I will be responsible for paying a full month's tuition, regardless of my payment status.

_____ Tuition holds a spot for each child and is not based on actual attendance. There will be no make-up days or switching days due to absence, illness, holidays, breaks, snow days, etc.

_____ I agree to pay my child's full monthly tuition regardless of school closures, graduation from Pre-K, and start of Kindergarten.

_____ I understand that GSC reserves the right to dis-enroll a child and have read the disenrollment policy outlined in the Parent Handbook.

Child's Name: _____ **DOB:** _____

4. Schedule Changes

I have read the policy regarding schedule changes in the Parent Contract and agree to the following:

_____If I need to make a change to my child’s schedule, I will request a schedule change in writing. I understand that every effort will be made to accommodate such a change, but it is not guaranteed.

5. Sick Policy

I have read the policy regarding communicable disease management in the Parent Handbook and agree to the following:

_____I will keep my child home if he/she has a fever of 100 degrees or higher, has diarrhea and/or vomiting, has a rash other than eczema, has yellow or green mucus discharge, or has any of the other symptoms listed in the Parent Handbook.

_____I agree to pick up my child promptly if he/she exhibits any of the aforementioned symptoms.

_____I agree to notify Garcia Street Club if my child contracts a communicable disease.

6. Items From Home

I have read the policy regarding items from home in the Parent Handbook and agree to the following:

_____I agree to label all of my child’s belongings including all types of clothing (hats,underwear, socks, shoes, etc.), backpack, lunchbox, water bottle, bedding, and any other school items.

_____I agree to provide one comfort item for my child as needed for rest time at school.

_____I understand it’s best to keep toys, special items, jewelry, etc. at home to minimize conflict and disruption in the classroom.

Child’s Name:_____ **DOB:**_____

PHOTO RELEASE FORM

I, being the parent/guardian of _____, hereby consent that the photographs or videos taken of them during child care while they are enrolled at Garcia Street Club as a student may be used by Garcia Street Club.

I give my permission for my child’s photographs and videos to be used in the following context:

*Please initial next to each

Online

- _____ GSC’s website photo gallery
- _____ Social media sites
- _____ Daily reports/emails to families
- _____ Advertising

In-school

- _____ Documentation panels
- _____ In-service training

Assessment

- _____ Portfolios

Other media

- _____ Newspaper or other media entities

Pictures or videos of students appearing online will not include any personal identification (i.e., student name).

Furthermore, I understand that no royalty, fee, or other compensation shall become payable to me by reason of such use.

Signature of Parent _____

Child’s Name: _____ **DOB:** _____

PHYSICIAN'S FORM

This section to be completed by PHYSICIAN:

I have known this child since: _____ Date of last exam: _____

Please circle any present health concern(s):

- | | | |
|---|---|--|
| <input type="checkbox"/> bee sting allergy | <input type="checkbox"/> hearing difficulties | <input type="checkbox"/> other(s): _____ |
| <input type="checkbox"/> allergies | <input type="checkbox"/> visual difficulties | |
| <input type="checkbox"/> asthma | <input type="checkbox"/> abnormal bleeding | _____ |
| <input type="checkbox"/> diabetes | <input type="checkbox"/> scoliosis | |
| <input type="checkbox"/> congenital anomalies | <input type="checkbox"/> seizures | _____ |
| <input type="checkbox"/> urinary difficulties | <input type="checkbox"/> cardiac difficulties | |

Please note: All life-threatening health conditions, allergies, and asthma conditions require a health care plan prior to attending school.

Please list ANY current medication(s) and dosages _____

I have examined this child and find them physically able to participate in:

_____all physical activity _____limited physical activity _____no physical activity

Please explain nature and duration of any limitation(s):

Physician signature: _____ **Date:** _____

Additional Comments:

Child's Name: _____ **DOB:** _____

IMPORTANT INFORMATION

Drop-Off: Parents and guardians are expected to bring their child to the door of the school to be checked in and picked up by their teacher and brought to their classroom. A parent or guardian must sign their child in and out each day. Children are required to arrive by 9:00 a.m. If you are going to be late, kindly notify the office by 9:00 a.m. If you have any concerns about your child's health at drop-off, please notify the teacher of your child's recent symptoms and be available to pick your child up early if she/he is not well enough to participate in daily activities. See handbook for list of symptoms requiring your child to stay home.

Pick-Up: Only authorized persons will be allowed to pick up your child. If there is a change in who will pick up your child, please notify the office. All new persons will be required to show identification. If you arrive after 4:00 you are considered late. Please call the office if you will be late, otherwise a late fee will incur.

Parking: Due to limited parking in front of the school, please pull as far forward as possible allowing for other vehicles to pull in during busy drop-off and pick-up times.

Updating Contact Information: During the school year, your contact numbers may change. It is imperative that you alert the front office of any changes so we can update your child's file.

Toys from Home: Children should not bring toys to the school. A familiar "comfort" item such as a special stuffed animal or book for naptime is welcome.

Items Your Child Needs at School: Your child will need a *water bottle* for drinking, that remains at school and is clearly labeled. Each child must have several changes of *clothing* (including socks, underwear and shoes) that remain at school. All items must be clearly *labeled* with your child's name. Children will be spending time outside in the playground daily, except in the most inclement weather. Even if it is cold, we will take the children outside for a few minutes of exercise and fresh air. Please provide your child with a sun hat, rain boots, sweater or jacket, waterproof mittens, snow pants and snow boots as required by the season. Children should also be provided with a *small blanket, crib sheet, and small pillow* for naptime. These items must be placed in a pillowcase for storage and taken home and laundered weekly.

Meals: Breakfast is served between 8:30 a.m. and 9:00 a.m. and an afternoon snack is served at 2:30 p.m. We promote wholesome, nutritious meals and snacks. A weekly breakfast and snack menu is posted on the family resources board and outside near the check in area. Food exceptions are considered for children with allergies and/or personal reasons. If a child exhibits allergies to particular foods on the menu, parents are advised to provide alternate foods that are acceptable for their child. Each child should bring their *own lunch* including a napkin and utensils. We suggest a pack of blue ice for foods that require refrigeration. Please label your child's lunch box or sack with his/her name.

Sunscreen/Medication: Please be sure to apply sunscreen to your child *prior* to arrival at school. Teachers will apply sunscreen to your child as needed after written permission has been obtained. Any medicine prescribed for your child should never be sent in lunch boxes. All medication should be given directly to your child's teacher and a Medication Authorization Form must be completed before any medication is administered.

Holidays/Birthdays: At Garcia Street Club we enjoy celebrating holidays and birthdays in the classroom. Since family traditional celebrations are important as they reflect the heritage of the child, we encourage participation of holidays from all cultures and backgrounds. We would enjoy sharing your traditions with you and your child and wish to include them in our curriculum. Please arrange with your child's teacher to celebrate special holidays or your child's birthday with his/her classmates at school.

2023-2024 GARCIA STREET CLUB CALENDAR

IMPORTANT DATES:

First Day of 2023-2024 School Year: Monday, August 21, 2023
Last Day of 2023-2024 School Year: Friday, May 17, 2024
2023 Summer Camp: Tuesday, May 28, 2024 – Friday, August 9, 2024

Garcia Street Club will be CLOSED on the following dates:

Labor Day (Monday, September 4, 2023)
Indigenous Peoples' Day (Monday, October 9, 2023)
Election Day (Tuesday, November 7, 2023)
Thanksgiving Break (Wednesday, November 22 – Friday, November 24, 2023)
Winter Break (Monday, December 18, 2023 – Tuesday, January 2, 2024)
Martin Luther King Jr Day (Monday, January 15, 2024)
Presidents' Day (Monday, February 19, 2024)
Spring Break (Monday, March 25, 2023 – Monday, April 1, 2024)
End of School Year Break (Monday, May 20, 2024 – Monday, May 27, 2024)
Juneteenth Day (Wednesday, June 19, 2024)
Independence Day Break (Thursday, July 4 – Friday, July 5, 2024)
End of Summer Break (Monday, August 12, 2024–Friday, August 16, 2024)

In-Service Training

The first Friday of every other month, Garcia Street Club closes at 12:00 p.m. for staff in-service training. Please note the in-service dates for the 2022-2023 school year.

In-Service Training Dates for 2022-2023

September 1, 2023	12:00 Closure
November 3, 2023	12:00 Closure
January 5, 2024	12:00 Closure
March 1, 2024	12:00 Closure
May 3, 2024	12:00 Closure

Snow Closure Policy: GSC typically follows the weather-related closure and release decisions made by Santa Fe Public Schools. It is extremely important that working parents have pre-arranged back-up child care available to them in the event of a weather-related closure. School closures are announced on SFPS's website at www.sfps.info as well as local news affiliates. We will also send a Brightwheel message and leave a message on the school's outgoing voicemail message. In the event of a 2-hour delay, GSC will open its doors at 10:00 am.