

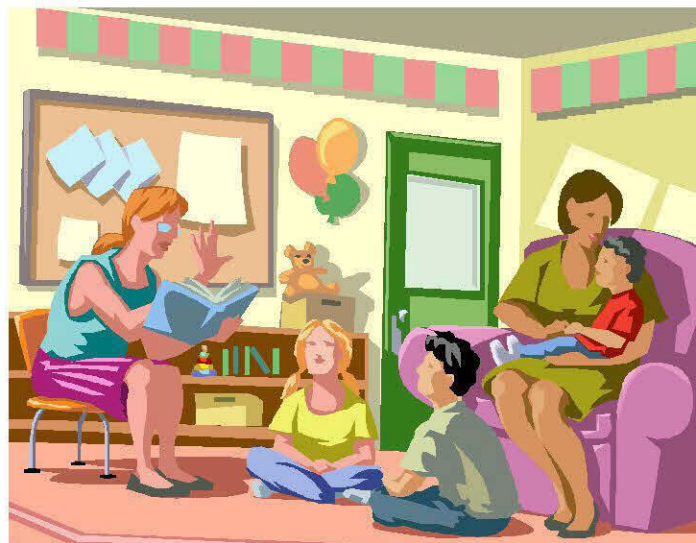
Gethsemane Baptist Child Care & Learning Center

4505 Tompkinsville Rd.

Glasgow, KY 42141

(270)678-5460

Director, Brittany Gibbons



Learning in a Christian Environment!

Gethsemane Baptist Child Care and Learning Center Mission Statement

It is our intent to provide high quality child care to each individual child in a well maintained, safe, and nurturing environment. Our goal is to teach needed social behaviors and to help each child with the start of their educational process. The Christian principles of the Word of God will be the focal point and used in every area of this ministry. All teaching endeavors will be age appropriate.

Gethsemane Baptist Childcare and Learning Center

Hours of operation are 6:00 am to 5:30 pm, Monday thru Friday.

A \$30.00 enrollment fee is due prior to your child's enrollment. This fee is non-refundable. The first week's tuition must be paid prior to enrollment and is due on **Monday** of each week or the first day of the week that your child attends. **Payment is due in advance of service regardless of attendance.** A fee of \$2.50 per day will be added to all accounts not paid on Monday by the close of business that day. Payments will remain the same even if daycare is closed for a holiday. You do not pay for the two weeks of the year that we are closed; the week of the fourth of July and the week of Christmas.

***The following fees are for 9.5 hour days. There will be a \$5.00 charge each hour thereafter.**

Full Time

Infants (6 weeks-12 months)	\$110 per week
One Year Olds	\$110 per week
Two Year Olds	\$105 per week
Three – Five Year Olds	\$100 per week

Part Time (3 days per week)

Part time enrollment will only be available if we do not have a full time inquirer. If we do have a full time inquirer the enrolled part time will be given the option to change to full time or we will give your slot to the inquirer. You must give specific days of the week that your child is expected to attend and payment is required regardless of attendance.

Infants (6 weeks- 12 months)	\$80 per week
One Year Olds	\$80 per week
Two Year Olds	\$75 per week
Three – Five Year olds	\$70 per week
Half Day Preschool (5 days 8am – 12pm)	\$70 per week
School age Sibling	\$20 per day (for one day breaks) \$100 per week (for school breaks) \$70 per week (for before and after school)

Sunday school Discount: Any child enrolled in daycare that attends Sunday school at Gethsemane Baptist Church will receive a \$10.00 discount per week for full time and \$6.00 per week for part time. This will be deducted from the next payment following their Sunday school attendance.

Sibling Discount: If you have more than one child attending daycare you get a discount of \$10.00 per week for full time or \$6.00 per week for part time off of your total weekly bill.

There will be a charge of \$1.00 per minute for each minute your child is here past the time the center is to close.

Gethsemane Baptist Child Care and Learning Center Policies and Procedures

1. Only the persons that you authorize will be allowed to pick up your child or children, so please make sure you add each person that could possibly pick up your child. Anyone other than you that picks your child or children up will be asked to show identification.
2. Please bring your child's shot record prior to enrollment and an updated copy as needed. This is a state requirement.
3. Please do not bring your child to the center if he/she has had a fever of 100.4 degrees or more in the past 24 hours. If medication is to be administered at the center, please fill out the medication log located in on the director's desk. This is to be filled out daily. The medicine must be age appropriate for the child and must not be out of date. The name of the person taking the medicine must be on the bottle. You must pick up unused medicine at the end of each day. If your child needs medicine for a rash, a medicine sheet must be filled out. If your child shows signs of illness he/she will be isolated and we will notify you to pick up your child as soon as possible. Please notify us if your child has been exposed to a communicable disease.
4. Please call the center if your child will not be attending daycare on a day that they are scheduled to attend.
5. Your child needs a change of clothes left in his/her cubby at all times marked with their name. Items not marked are not the centers responsibility if they are lost.
6. Please do not let your child bring gum, candy or food to the center unless you have enough for everyone. Your child should not bring any toys from home.
7. We will begin potty training in the two year old room when you feel that your child is ready.
8. All bottles and baby food jars must be clearly marked with the child's name.
9. We serve breakfast, lunch and afternoon snack. If you want your child to eat these meals they must be present at each time these meals and snack are served. Breakfast is at 8:30am. Lunch is at 11:30am. Snack is at 2:30pm.
10. Please make sure that your child is received by his/her teacher each time you drop him/her off at daycare.
11. You will be responsible for all fees and charges set forth by Gethsemane Baptist Child Care and Learning Center. Accounts will not be allowed to go past two weeks without payment. If collection action is taken on your account you are responsible for all cost and legal expense.
12. A fee box is located by the director's desk for you to deposit your weekly tuition. Please use envelopes for cash.

13. There will be a \$25.00 charge on all returned checks.
14. The center will be closed the following days New Year's Day, Memorial Day, Labor Day, Thanksgiving Day, and the day after Thanksgiving. You **will** be responsible for paying for these days.
15. The center will be closed the week of the Fourth of July and the week of Christmas. You **will not** be responsible for paying these weeks.
16. If your child is not here by 11:30 am, please wait until after naptime to bring your child, unless other arrangements are made with the director.
17. Following lunch a naptime is provided. The center furnishes a mat and a freshly sanitized sheet each week. Parents should furnish a small, washable blanket with the child's name clearly written on it. The blanket will be sent home each Friday for laundering and should be brought back to the center each Monday.
18. A two week written notice to the director is required if your child will be leaving the center or is changing from full time to part time; or payment for those two weeks will be required.
19. Gethsemane Baptist Child Care and Learning Center will not be responsible for any lost or damaged items of clothing or toys.
20. Your child should wear play clothing suitable for indoor and outdoor play. If the center has to loan clothing please launder and return them promptly.
21. Positive redirection and time out will be our methods of discipline. If your child has a disciplinary problem, such as habitual biting, all appropriate measures will be taken at the center; if the problem cannot be resolved he/she will be dismissed from the center.
22. The Christian principles of the King James Version Bible will be the focal point and used in every area of the daycare.

**Gethsemane Baptist Child Care and Learning Center
Enrollment Agreement**

I have read and understand the policies, procedures, emergency disaster plan and fees set forth by Gethsemane Baptist child Care and Learning Center. I am in agreement with the policies, procedures, emergency disaster plan and fees regarding my child's enrollment in the center.

Parent/Guardian Signature

Date

Gethsemane Baptist Child Care and Learning Center
Enrollment Form

Enrollment Date _____

Child's Full Name _____

Name Child is Called _____ Sex _____

Date of Birth _____ Social Security Number _____

Child's Home Address _____

Child's Home Phone Number _____

Parent/Guardian Information

Father's Name _____ Cell Phone _____

Father's Address _____

Father's Place of Employment and Address _____

Work Phone _____ Father's Email _____

Mother's Name _____ Cell Phone _____

Mother's Address _____

Mother's Place of Employment and Address _____

Work Phone _____ Mother's Email _____

Family Information

Brothers and/or Sisters (please indicate whether they live with the child) _____

Please list any other persons living with the child and their relationship (if any) to the child _____

Reference Source

How did you hear about the center? _____

Emergency Contacts other than Parents

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Pick Up Authorization

Name _____ Phone _____ Driver's License # _____

Name _____ Phone _____ Driver's License # _____

Name _____ Phone _____ Driver's License # _____

Name _____ Phone _____ Driver's License # _____

Are there any special circumstances we should know about regarding your child being picked up? _____

Medical

Name of Family Physician _____

Office Phone Number _____

Preferred Hospital and Address _____

Does Child have any Allergies? _____ If so, List Allergies _____

Are there any medical problems we should be aware of? _____

Personal History

Is the child right or left handed? _____

Has the child had previous group of preschool experience? _____

If so, when and where? _____

What words does the child use for toileting? _____

Does the child have any bowel or bladder irregularities? _____

Are there any special food or eating instructions? _____

List any food allergies _____

Are there any sleeping or napping instructions? _____

Any additional information, such as discipline, child's communication, comforting, etc.? _____

Please give anticipated daily feeding schedule for your infant. _____

Time Schedule (Please indicate the day and times your child will be attending)

Will your child be enrolled full time or part time? _____

Monday in _____ out _____

Tuesday in _____ out _____

Wednesday in _____ out _____

Thursday in _____ out _____

Friday in _____ out _____

I _____ understand that I will be responsible for paying \$ _____ weekly, regardless of my child's attendance.

I hereby authorize the daycare operator and staff to obtain emergency medical care for my child _____.

Parent/Guardian Signature

Date

Photograph

Permission given for photograph purpose. _____

Parent/Guardian Signature

Permission given for my child's photo to be used on the center's facebook page.

Parent/Guardian Signature

Other

Is there any other information about your child that you feel necessary that we know? Please explain.
