

Enrollment Date: _____

Information Update Only: _____



BLOSSOM & GROW FINE ARTS PRESCHOOL

2816 14th N - Idaho Falls, ID 83401

blossomgrowprek@gmail.com --- (208) 821-1518

www.blossomgrowprek.com

Please check which class you are registering for below:

- Mon/Wed/Fri (4-5 yrs old): 9:00 am – 12:30 pm = \$160 Monthly Tuition
- Mon/Wed/Fri (4-5 yrs old): 9:45 am – 1:15 pm = \$160 Monthly Tuition
- Mon/Wed/Fri (4-5 yrs old): 10:45 am – 2:15 pm = \$160 Monthly Tuition
- Tues/Thurs (3-4 yrs old): 9:00 am – 11:30 am = \$130 Monthly Tuition
- Tues/Thurs (3-5 yrs old): 9:45 am – 12:15 pm = \$130 Monthly Tuition
- Tues/Thurs (3-5 yrs old): 10:45 am – 2:15 pm = \$145 Monthly Tuition
- Tues/Thurs (3-5 yrs old): 12:30 pm – 3:00 pm = \$130 Monthly Tuition

Registration Form

Child: _____ Birthdate: __/__/__ Sex: M__ F__

Child's Address: _____

Full name of Mother: _____ Email _____

Mother's Address: Same as child _____

Home Phone: _____ Work Phone: _____ ext. ____ Cell Phone: _____

Place of work: _____ Hours: _____ Contact 1st

Full name of Father: _____ Email _____

Father's Address: Same as child _____

Home Phone: _____ Work Phone: _____ ext. _____ Cell Phone: _____

Place of work: _____ Hours: _____ Contact 1st

Emergency Contacts

Minimum 2 contacts, other than parents, to contact in case of emergency/authorized to pick up child:

1. Name: _____ 2. Name: _____

Relationship to child: _____ Relationship to child: _____

Home Phone: _____ Home Phone: _____

Cell or Work Phone: _____ Cell or Work Phone: _____

Other Person(s) Authorized to pick up child:

Name: _____ Relationship _____ Phone: _____

Name: _____ Relationship _____ Phone: _____

Name: _____ Relationship _____ Phone: _____

Child's Health Information and History

Child's Doctor: _____ Phone: _____

Are your Child's immunizations up to date? Yes () No ()

Note: Please attach a copy of your child's immunization record. If your child is not immunized or they are not up to date, please ask for a waiver and turn that in. We MUST have something on file.

Does your child have any known health problems? Yes () No () (If yes attach documentation)

Does your child have any special needs? _____

Does your child have any known allergies? Yes () No () If yes, what are they and what are your child's reactions:

❖ **If your child suffers from life-threatening allergies, it is essential that you provide an Allergy Information form from your physician.**

Does your child have any speech, hearing, or visual problems? Yes () No ()

Please comment on any other medical information/or special need the childcare provider should be aware of:

Medication and Emergency Care Authorization

I authorize **Blossom & Grow Fine Arts Preschool** to administer the following as deemed necessary by staff for the comfort and well-being of my child.

(Please cross off any item you would prefer not to be used)

Yes No I authorize the use of typical first aid supplies including but not limited to Neosporin, anti-bacterial ointment, cortisone, sunburn treatments, band-aids, and liquid Band-Aids.

Yes No I authorize the use of preventative supplies, such as sunblock, bug repellent, hand lotion, etc.

NOTE: Prescription medications that need to be administered at school will require a separate authorization form and must be sent to school in the original prescription bottle with clear doctor instructions. Medications will be labeled with your child's name and kept locked up.

I authorize **Blossom & Grow Fine Arts Preschool** to obtain the following services for my child if necessary: Public Emergency Room, EMS and/or Ambulance transport in the event of an emergency. (Ambulance fees and/or health care costs are the responsibility of the parent/guardian).

Comments/Exceptions: _____

Photo Authorization

Photographs and videos are taken on occasions such as birthdays, holidays, outings, and special events, as well as in the normal course of our day. We use these pictures/videos for teaching, sharing information about their day, arts & crafts, albums, class books, picture CDs, and various other things.

Please mark the appropriate box(s):

I give permission to **Blossom & Grow Fine Arts Preschool** to take photographs/videos of the above-named child(ren). Photos will be posted in the PRIVATE class Facebook group and/or given to parents as a remembrance of their child's year (including other families in the program).

In Addition:

I give permission for photos/videos to be posted on our PUBLIC preschool Facebook or Instagram account

I give permission for my child's photo to be used on printed marketing materials (pamphlets, flyers, advertisements, etc.)

OR

I do NOT want any photos/videos posted of my child in any form.

Parent Agreement

I, the undersigned, agree to the following:

_____ To enroll my child at Blossom & Grow Fine Arts Preschool for the 2024-2025 school year.

_____ To pay all fees and tuition payments by their respective due dates.

_____ To give 30 days' written notice of withdrawal of my child. If sufficient notice is not given, then one calendar month's tuition may be forfeited.

_____ To deliver my child on time and directly to a staff member, to never take my child from school without informing a staff member, and to pick up my child on time.

_____ To notify the school in advance if anyone other than the parent/guardian is picking up my child.

_____ To advise the school if there are any changes in the family relationship, including any changes to the custody/access of the child.

_____ I understand that absences due to illness or holiday and school closures due to severe weather conditions and/or natural disasters are not exempt from payment.

_____ To keep my child from school if there is any question of illness, and to notify the school about any serious illness.

_____ The school reserves the right to release a child if the school decides it is best for the child and/or the school.

(Signature of parent/guardian)

(Date)

.....

I hereby certify that all the information given regarding my child's registration is deemed complete and correct.

(Signature of parent/guardian)

(Date)

Parent Registration Checklist & Tuition Breakdown

To be considered officially registered with Blossom & Grow Fine Arts Preschool, we need the following:

- A completed registration
- Payment for your child's classroom registration & supply fee of \$100.00. This fee covers processing your paperwork and all your child's school supplies throughout the year.

Once the above items are received, your child's spot in the Blossom & Grow Fine Arts Preschool will be secured.

By August 1, 2024, we will need the following:

- A copy of your child's immunization records or immunization waiver
- Any doctor notes or directives regarding special needs or allergies

Your monthly tuition will be due by the 1st of the month for each month (Sep 2024 - May 2025). Please see the tuition schedule listed below.

	<u>Due Date</u>	<u>Mon/Wed/Fri</u>	<u>Tues/Thurs</u>	<u>Tues/Thurs - 10:45 class</u>
September 2024	9/1/2024	\$160.00	\$130.00	\$145.00
October 2024	10/1/2024	\$160.00	\$130.00	\$145.00
November 2024	11/1/2024	\$160.00	\$130.00	\$145.00
December 2024	12/1/2024	\$160.00	\$130.00	\$145.00
January 2025	01/1/2024	\$160.00	\$130.00	\$145.00
February 2025	02/1/2024	\$160.00	\$130.00	\$145.00
March 2025	03/1/2024	\$160.00	\$130.00	\$145.00
April 2025	04/1/2024	\$160.00	\$130.00	\$145.00
May 2025	05/1/2024	\$160.00	\$130.00	\$145.00

*** Blossom & Grow Fine Arts Preschool accepts cash, check, or card payments