



## Enrollment Profile & Permissions

Child's First Name

Child's Last Name

Today's Date

Child's Start Date

Child's Home Address

City

State

Zip Code

Gender

☐ M ☐ F

Date of Birth

Child's Home Phone Number

Program Needs (check all that apply)

☐ Monday

☐ Tuesday

☐ Wednesday

☐ Thursday

☐ Friday

What language(s) is spoken in your home?

What milestone(s) has your child reached? (e.g. rolling over or crawling)

Does your child take a pacifier? (If yes, when?)

☐ Y ☐ N

List any additional care plan instructions. (e.g. diapering or sleeping)

Does your child receive special services? If yes, please describe:

Please fill out the infant feeding plan the day your child starts.

Parent/Guardian Signature

Date

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Parent Information

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1st Parent's Last Name

First Name

2nd Parent's Last Name

First Name

Address

Address

Home Phone

Cell Phone

Home Phone

Cell Phone

Email

Email

Work Phone

Place of Employment

Work Phone

Place of Employment

Address of Employment

Address of Employment

Normal Work Hours/Days

Normal Work Hours/Days

Marital Status

☐ Married ☐ Separated ☐ Divorced ☐ Widowed ☐ Other \_\_\_\_\_

Child's Legal Guardian

☐ Both Parents ☐ Mother ☐ Father ☐ Other \_\_\_\_\_

Child's Living Arrangements

☐ Both Parents ☐ Mother ☐ Father ☐ Other \_\_\_\_\_

1st Parent's/Guardian's Signature

Date

2nd Parent's/Guardian's Signature

Date

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### Medical Information

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**Doctor Name** (to be contacted if parents can't be reached)

**Phone**

**Address**

**Dentist Name**

**Phone**

**Address**

**Health Insurance Provider**

**Phone**

**Address**

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### Emergency Contacts

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The child may be released to the person(s) signing this agreement or to the following with photo ID:

**Name**

**Relationship**

**Phone Number**

**Name**

**Relationship**

**Phone Number**

**Parent/Guardian Signature**

**Date**

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### Emergency Transportation Agreement

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I, \_\_\_\_\_ give permission for Kids 'R' Kids of Montville to seek medical attention and/or transport my child, \_\_\_\_\_ in the event of an emergency if I cannot be reached. I further agree to hold harmless and release Kids 'R' Kids of Montville and Kids 'R' Kids International, Inc., from all liability. I further agree to keep the facility informed of any changes in the information stated above.

**Parent/Guardian Signature**

**Date**

# Electronic Funds Transfer Authorization For Bank Account & Credit Card

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

I (we) hereby authorize (business name) \_\_\_\_\_ to initiate credit card charges to the below-referenced credit card account **(Section A)** OR, initiate debit entries to my (our) checking or savings account, indicated below **(Section B)**. To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types. **Complete one section only.**

## Section A: Credit Card

Cardholder Name

Phone #

Cardholder Address

City

State

ZIP Code

Account Number

Expiration Date

Cardholder Signature

Date

## Section B: Bank Account

Your Name

Phone #

Address

City

State

ZIP Code

Bank or Credit Union Name

Bank or Credit Union Address

City

State

ZIP Code

Routing Number

Account Number

☐ Checking  
☐ Savings

Authorized Signature

Date

## For Center Use Only

Date Received

Employee Signature

# Financial Policies

Please initial each point.

- \_\_\_\_\_ To enroll at Kids 'R' Kids, Montville, (KRK) a one-time registration fee of \$150 per child is required along with the first month's tuition payable by check. Each child requires a \$150 registration fee. Thereafter, there will be a registration fee billed every September for the new school year. Any child enrolled within 60 days is exempt. All registration fees are non-refundable. If for whatever reason you need to withdraw from our school prior to your start date, your first tuition payment will not be refunded.
- \_\_\_\_\_ Tuition payment will be withdrawn from a checking or savings account on the 20th of each month for the upcoming month. Auto pay (EFT) is the only form of payment accepted. There will be no deductions and/or refunds for any reason including absence (i.e. sick days or personal vacations), holidays, teacher workdays, Covid closures, and days that the school is closed for inclement weather.
- \_\_\_\_\_ If the 20th falls on a weekend or holiday, funds will be withdrawn either the day before or on the next banking day at the discretion of KRK.
- \_\_\_\_\_ In the event of insufficient EFT funds from your checking or savings account, a \$50 late payment will be charged. If we receive a returned check, a \$50 NSF fee will be charged. After (3) NSF's, the only accepted form of payment will be debit. (Processing fees apply)
- \_\_\_\_\_ If the tuition and late fee are not paid by the close of the third business day, your child/children will not be permitted to attend the school until account balance is paid in full.
- \_\_\_\_\_ Any additional fees (Late Pick-up, Drop-In, etc.) must be paid the day they are incurred. Drop-In fees may be paid by check, credit or debit card. Late pick-up fees, however, must be paid in cash. Parents who pick up their children after 6:00 will be charged \$1 per minute for every minute past 6:00.
- \_\_\_\_\_ Whenever a credit or debit card is used, a 3% processing fee will apply.
- \_\_\_\_\_ Families are responsible for initiating the child's withdrawal process. Should it become necessary to withdraw your child for any reason, a minimum of a full month (30 day) written notice is required to the administration. If a thirty-day written notice is not given, full tuition for the following month will be charged. No portion of your monthly paid tuition will be refunded in the event of withdrawal.
- \_\_\_\_\_ In the event that KRK is forced to take any action to collect any amount of unpaid tuition, then the parent will be responsible and agrees to reimburse KRK for any and all attorney fees, filing fees and/or costs associated with any collection efforts made by KRK either individually or through its legal counsel, against parent.
- \_\_\_\_\_ Kids 'R' Kids is a full time facility and requires full month to month tuition payments while your child is enrolled in our center, regardless of time off from KRK. Should you leave for an extended period of time (30 days or longer) and decide to withdraw your child, you will need to repay our \$150 registration fee per child and full months tuition payment to re-register and secure a start date. Please note in the event of a withdrawal, we cannot guarantee a start date as any family on our waitlist will be on a "first come first serve" basis in respect to the order of our waitlist registrations.
- \_\_\_\_\_ KRK reserves the right to change the tuition and/or program fees due to unforeseen increases in expenses.

\_\_\_\_\_ If you decide to enroll your child for our 4 day/week option, you must have a consistent schedule week to week as listed on your enrollment form. Any changes to your child's schedule would need to be approved by administration. If your child attends on an unscheduled day, you will be charged our Drop in Rate. There are no changes in schedule due to absences or school closures.

**Child's Name** (please print)

**Parent/Guardian Signature**

**Date**

## Common Sickness / Wellness Policy

If your child has a fever at or above 100.4 F, has 3 or more diarrhea instances, or has 1 or more vomit instances in class, the parent will be asked to pick up the sick child and keep him/her home the following day (no exceptions!). This allows time for the sick child to get the appropriate amount of rest, and ensures the wellbeing of other children in the class.

All your child's belongings (diapers or extra pair of onesies/clothes) remain in the classroom. Please label them. Please be mindful that we have limited cubby space per child. Please ask the teachers as to what the appropriate number of diapers and onesies will be, and how often you will need to replace them.

In cases of pink eye, coxsackie, lice, or other communicable (contagious) diseases – We will need a doctor's note stating that your child is fit to resume school.

**Parent Signature**

**Date**



## Receipt of Family Handbook & Licensing Policy Information

**Please initial next to each item and sign below.**

We have highlighted below the sections of our family handbook that discuss the important licensing policies. Please sign below indicating that you have received the following policies:

- ☐ Information to Parents
- ☐ Expulsion Policy
- ☐ Policy on the Management of Communicable Diseases
- ☐ Policy on the Release of Children
- ☐ Communications/Methods of Parental Notification
- ☐ Policy on the Use of Technology and Social Media

I have received a copy of the family handbook and have read and received a copy of the information/policies required by the state of New Jersey.

**Child's Name**

**Parent/Guardian Name**

**Parent/Guardian Signature**

**Date**





## Photo Release Permission

At Kids 'R' Kids of Montville, your child will be participating in various activities, events and fun learning opportunities. We often take photos to share on the Tadpoles App, use on crafts, in classroom displays and on social media such as Facebook. Please indicate below granting us permission to use your child's photos.

- ☐ I give permission for my child's photos to be used for all purposes listed above, including social media.
- ☐ I give permission for my child's photos to be used for internal use only (Tadpoles reports, crafts, and classroom displays) but DO NOT want the photos used for social media purposes.

**Child's Name**

**Parent/Guardian Name**

**Parent/Guardian Signature**

**Date**