



1152 N. Rutherford Blvd. • Murfreesboro, TN 37130
(615) 907-5437 • (615) 907-5707 Fax

Enrollment Application

MUST be filled out completely

Entrance Date:	Withdrawal Date:	
Child's Name:	Age: Sex:	Birthdate: SS#:
Child's Name:	Age: Sex:	Birthdate: SS#:
Mother's Name: Address:	Home Telephone: SS#: Email:	
Mother's Place of Employment: Address:	Business Telephone: Cell Number: Email:	
Father's Name: Address:	Home Telephone: SS#: Email:	
Father's Place of Employment: Address:	Business Telephone: Cell Number: Email:	
Marital Status: () Single () Married () Separated () Widowed () Divorced* * If divorced, who has primary custody of child: * Custody documents from court must be provided to inform us of child pick up arrangements.		

Relatives/Friends allowed to pick up and emergency contacts:

NAME	ADDRESS	TELEPHONE	RELATIONSHIP

Physician to be contacted when parents cannot be reached:

NAME	ADDRESS	TELEPHONE

Kids 'R' Kids #2TN Learning Academy agrees to provide child care for _____ (child's name) and _____ (child's name)
as a full-time, part-time or drop-in (circle which applies) student.

PARENTAL AGREEMENT

- ____ (Initials) 1. Full time children who attend two to five days **MUST** pay their full weekly tuition. Children who attend zero to one day **MUST** pay half their weekly tuition to reserve their place (**MAXIMUM** four half weeks or two full weeks per enrollment year). We **DO NOT** discount part time tuition.
- ____ (Initials) 2. School Holiday/Summer Weekly Rate: 1 day = 1/2 weekly rate; 2-5 days = full weekly rate.
- ____ (Initials) 3. **I agree to pay the total weekly fee on Friday for the upcoming week and each week thereafter. I also agree to pay a YEARLY enrollment fee on the child(ren)'s enrollment anniversary EACH year.** If all fees are not paid by 6:30 p.m. each Monday, a \$30 late fee will be applied.
- ____ (Initials) 4. Time being of the essence, if any fees are not paid on Friday of each week, the past due balance shall bear interest at the rate of one and one-half percent (1½%) per month and should any amounts be collected by an attorney, we agree to pay fifteen percent (15%) of all sums owed as attorneys fees. I further understand that if my tuition should become more than 1 week past due, I will be disenrolled from Kids 'R' Kids #2TN and/or legal action will be taken.
- ____ (Initials) 5. If your check returns for any reason \$35 will be charged to your account.
- ____ (Initials) 6. I agree to pay \$2.00 for every minute my child is left past 6:30 p.m. After 7:00 p.m., I understand that proper authorities will be notified if I have not made previous arrangements, and the fee will be \$5.00 per minute after 7:00 p.m.
- ____ (Initials) 7. School Holiday & Early Release Rates are in addition to your regular rate. (**See Tuition Price List**)
- ____ (Initials) 8. Drop-Ins must call in advance for availability.
- ____ (Initials) 9. Immunization records are due within 30 days of enrollment for ALL children. Failure to provide the required forms within the 30 days will result in immediate disenrollment. If child(ren) is(are) of school age, his/her shot record is on file at _____.
10. I agree to provide the center with all necessary information pertaining to administering medicine to my child(ren). All medication is administered at times designated by Kids 'R' Kids #2TN. A medicine form with parent signature is required in order to administer medications. No over the counter meds will be given without a note from your child's pediatrician.
11. Should my child become ill during the time that he or she is in the care of Kids 'R' Kids #2TN or suffer an accident of any nature, the center shall take all possible actions to contact me immediately and shall be authorized to secure such medical attention and care for the child as may be necessary. The parent shall assume responsibility for payment.
12. Visiting your child's class is permitted as long as it creates no disturbance.
13. I agree to keep the center informed as to changes in telephone numbers, etc. where I may be reached.
14. We do not allow children with communicable diseases in the center. I understand that if my child is ill, including, but not limited to, a severe cough or sore throat; undetermined rash or spots; temperature over 101 degrees; severe headaches, upset stomach or diarrhea, he or she cannot be accepted into the center until well. In the event my child has a communicable disease, a release form from a medical source may be required before my child re-enters the center. Kids 'R' Kids #2TN will notify parents if a communicable disease has been introduced into the center.
15. Kids 'R' Kids #2TN will not be responsible or reimburse for any lost or damaged items. Please label all items with First and Last name. Please leave all candy and toys at home.
16. I agree that Kids 'R' Kids #2TN reserves the right to advance my child to the next class without prior notification.
17. If your child does not adjust to our program, we reserve the right to withdraw him/her from the program.
18. I understand I am totally responsible for any special diet required by my child. If my child's diet consists of formula taken from a bottle, I understand I will provide Kids 'R' Kids #2TN with the appropriate number of bottles containing formula necessary for my child each day. Each bottle will be clearly labeled with my child's First and Last name and dated as per state regulations.
19. Absolutely NO PARKING in the Kiss N Go Lanes.
20. I understand that according to state regulations it is my responsibility to escort my child(ren) into and out of the center. I must sign my child in and out of the computer.
21. If my child wears diapers, I understand I will provide whatever disposable diapers are necessary for my child. If Kids 'R' Kids #2TN must provide, a \$1.00 fee per diaper will be charged to your account.
- ____ (Initials) 22. Transportation is provided to and from school and on planned field trips with parental permission. A separate form and signature are required for this service. A school transportation form can be signed once for each school year. A field trip form must be signed before each trip.
23. I understand that any babysitting services offered by Kids 'R' Kids #2TN staff off premises and/or outside of regular operating hours are done on their own behalf, not as an employee of Kids 'R' Kids #2TN. I will not hold Kids 'R' Kids #2TN responsible for anything that may arise from this service.
24. I understand that Kids 'R' Kids #2TN, North Point Academy Inc., 1152 N. Rutherford Blvd, Murfreesboro, TN, while a Kids 'R' Kids franchise, is independently owned and operated and that neither Kids 'R' Kids International, Inc. nor any Kids 'R' Kids center other than the one whose name appears at the heading of this form is responsible for the actions or obligations of this Center.
- ____ (Initials) 25. I understand and agree to the **Credit Card Authorization Form**. I understand that my credit card will be processed for payment on Mondays if my balance is more than \$0. It is my responsibility to make sure my account is paid in full every week.
- ____ (Initials) 26. I agree to give a two week notice in writing to change enrollment or to disenroll from our program. If no notice is given I will be charged two full weeks' tuition.
- ____ (Initials) 27. I also understand and agree to any price and rule changes that occur in the **Parent Handbook, Enrollment Application** and **Tuition Price List** during the duration of my child's/ children's enrollment at Kids 'R' Kids #2TN.
- ____ (Initials) 28. I have received, read, understand and agree to all fees and rules as listed on the **Tuition Price List** and **Enrollment Application** for Kids 'R' Kids #2TN. I agree to abide by all policies and procedures of Kids 'R' Kids #2TN as outlined in this agreement and the **Parent Handbook**. I have read and understand the above statements.
29. Kids 'R' Kids #2TN will be closed on the following holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Christmas Day.

Signed (Parent or Guardian) _____ Date ____/____/____

Signed (Director/Assistant Director) _____ Date ____/____/____