



Lake City Community Education Tiger Time 25/26 School Year Registration Form

For office use only:
Date/Time Received _____
Registration Fee Received _____

***\$30 Registration Fee per child *Family Cap \$60 *Registration Fees must be paid to enroll**
***Current enrolled families billing accounts must be up-to-date**

New Enrollment/Re-enrollment
(Please circle one)

Date _____

Child's Name _____ Birth date _____
Last First Nickname
Home phone _____ Cell phone _____ Sex: F M

Home Address _____ City _____ Zip Code _____

E-mail address (will only be used by Community Education for announcements and reminders, etc.) _____

Child lives with: _____ Both parents _____ Single Parent: _____ Mother _____ Father
_____ Other: specify _____

Mother's Full Name _____
Birthdate _____
Employer _____
Business Phone _____
Mobile Phone _____
Home Phone _____
Home Address _____

Father's Full Name _____
Birthdate _____
Employer _____
Business Phone _____
Mobile Phone _____
Home Phone _____
Home Address _____

Authorized Pick Up

People listed below have my authorization to pick up my child from the program. I will inform the staff each time a special pick up is necessary.

Name _____ Relation to child _____ Phone # _____
Name _____ Relation to child _____ Phone # _____
Name _____ Relation to child _____ Phone # _____

*Children will only be released from Tiger Time when **signed out** by an authorized person, parent or guardian.
Persons **NOT** authorized to take your child from the program. (Copies of legal documents **must** be provided to the program coordinator before any staff person can actively prevent non-custodial parents from picking up their child.)

1. _____ 2. _____

Parent/Guardian signature _____ Date _____

Emergency Information

Name of friends or relatives to call in case of illness or emergency if you cannot be reached:

1. _____ Address _____ Phone # _____

2. _____ Address _____ Phone # _____

Physician to be called in an emergency: _____ Phone # _____

Dentist to be called in an emergency: _____ Phone # _____

Insurance company: _____ policy number: _____

I hereby grant permission for Cub Care staff to take whatever steps may be necessary to obtain emergency medical care if warranted. These steps may include, but are not limited to the following: 1) Attempt to contact a parent or guardian. 2) Attempt to contact the child's physician. 3) Attempt to contact a parent through any of the persons listed in the emergency information you completed for us. 4) If we cannot contact you or your child's physician, we will do any or all of the following: a. call another physician or paramedics, b. have the child taken to an emergency hospital in the company of a staff member. 5) Any expenses under 4 above, will be paid by the child's family.

Parent/Guardian Signature: _____ Date: _____

Tiger Time Program Rates:

	<u>One Child</u>	<u>Two + Children</u>
All day summer care	\$5.50 per hour	\$4.50 per hour
Drop in rate (unscheduled days)	\$6.80 per hour	\$5.30 per hour

We have a minimum of 3 days per week required for enrollment in our programming

***We currently do not offer drop in care.**

Scheduling Information *Monthly calendars are required Starting Date Requested _____

School Day Hours: 5:45am-8am/3pm-6pm

Typical Schedule: M T W TH F Approx. drop off time _____
Approx. pick up time _____

If your child has an Allergy, please contact the childcare coordinator

***If your child needs prescription medication while in our program please see our child care coordinator**

TIGER TIME PERMISSION AND RELEASES

Child's Name _____ Date _____

PUBLICITY PERMISSION

In the event the Tiger Time program students are included in any newspaper, radio, on social media or television publicity, I give permission for my child to be included in the pictures and the release of their name.

POLICY AGREEMENT

I recognize my responsibility to respect the rules of the Tiger Time program as well as my responsibility to help my child respect the rules needed to provide a positive experience for all participants.

RECORDS RELEASE

I hereby authorize (name of school) _____ to release a copy of (child's name) _____ most recent school records, including but not limited to: immunization and physical exam records, special needs assessments, and IEP's in order to enable the Tiger Time program to better meet the needs of my child.

FIELD TRIP PERMISSION

Field trips may be planned from time to time as part of the activities of the Tiger Time program. I give my consent for my child to take part in field trips under proper supervision. I understand that I will have prior notification of all field trips out of town. Walking outings off school grounds that stay in town may not have prior notification. Examples include walking to the park, pool, or library.

NON-PRESCRIPTION MEDICATION PERMISSION

I hereby give the Tiger Time program permission to apply or administer any of the following which have been checked.

_____ Sunscreen (**must be provided in a labeled container by parent**)

_____ Insect repellent (**must be provided in a labeled container by parent**)

_____ Medical supplies: such as band aids, adhesive tape, hydrogen peroxide, antiseptic wipes, etc....

TRANSPORTATION CONSENT

I hereby give the employees of Tiger Time permission to transport my child in a school issued vehicle to activities within the city limits of Lake City as necessary. I understand that I will be notified in advance of any arranged trips that would involve my child being transported by Tiger Time personnel.

MOVIE/MEDIA RELEASE

I hereby give the Tiger Time permission to show my child movies rated G while in care at the school.

TOILET TRAINING

Children enrolled should be able to attend to their own personal hygiene. Children attending are required to be toilet trained and able to use the bathroom independently before they begin the program. If your child has an excessive amount of accidents, the staff will communicate with the parents to see if they can come up with a plan for the child to succeed in toileting issues. If the child continues to have accidents regularly, the child will be suspended until they are fully potty-trained. We will hold their spot for the remainder of the year (school/summer).

An extra change of clothing should always be packed or in their locker.

Definition of Being Potty Trained

A child is considered **fully potty trained** when they are able to:

- **Recognize the need** to use the bathroom and communicate that need to an adult.

- **Use the toilet independently**, including:
 - Pulling down and pulling up their own clothing.
 - Sitting on the toilet (with or without a seat insert).
 - Wiping themselves to the best of their ability.
 - Flushing the toilet.
 - Washing and drying their hands.

- **Stay dry** during naps and throughout the day with **minimal to no accidents**.

- **No longer require pull-ups or diapers** during the day, except in rare circumstances approved by parents and the director (e.g., medical or developmental needs).

Being potty trained means the child can manage toileting with minimal adult assistance and is able to consistently remain clean and dry while in our program.

Signature _____

Date _____