



HOBSON PRESCHOOL ENROLLMENT 2017-2018 SCHOOL YEAR

116 North 12th Street ~ Fort Smith, AR 72901 ~ (479) 783-4552 ~ fax : (479) 783-8947 hobson@lpres.org

Please enroll my child in Hobson Preschool. Enclosed is my enrollment payment of **\$150.00**, and I understand that this fee is non-refundable. **The first tuition payment is due August 31, 2017.**

Child's Name: First _____ Middle _____ Last _____
Please circle the name the child is to be called.

Present Age _____ yrs. _____ Mo. Date of birth: _____ Boy _____ Girl _____

Home Address: _____

City _____ State _____ Zip _____

Home Phone: (____) _____ Email Address: _____

Family Information:

Father's Name: _____ Occupation: _____

Father's Employer: _____ Business Phone: (____) _____

Father's Cell Phone: (____) _____

Email Address: _____

Mother's Name: _____ Occupation: _____

Mother's Employer: _____ Business Phone: (____) _____

Mother's Cell Phone: (____) _____

Child lives with: (Please Check) Both Parents _____. Mother _____. Father _____. Guardian _____.

MEMBERS OF HOUSEHOLD OTHER THAN PARENTS:

Name	Age	Relationship to Child
_____	_____	_____
_____	_____	_____
_____	_____	_____

Note: Class availability is based on enrollment. **Please complete the back of this form.**



Hobson Preschool Programs

Hobson Hours: 7:30-8:45 A.M. Early Bird Program 9:00 A.M. to 2:00 P.M. Preschool Program

Please review the list below and indicate your choices.

Child must be class age on or before August 1, 2017.

Preschool Program: 9:00 A.M. to 2:00 P.M.

Fives - Available 5 days – you choose the days that will best serve you. If you are planning on your child going into **1st Grade** in the public school system, **your child will need to attend all five days.** If you are planning for your child to go into **Kindergarten** in the public school system, you may choose the days that you want your child to attend.

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Fours – Available 5 days – you choose the days that will best serve you:

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Threes – Available 5 days – you choose the days that will best serve you.

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Toddler/Twos – Available 5 days – you choose the days that will best serve you.

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Early Bird Program: 7:30 A.M. to 8:45 A.M. – Children must be 2 by Aug, 1, 2017

Early Bird – Available 5 days – you choose the days that will best serve you.

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

After School - Preschool Program 2:00 P.M. to 6:00 P.M. Available 5 Days

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____



Hobson Preschool Enrollment 2017-2018

Child Pick UP List/Emergency Contact Information

Child's Name: _____

Emergency Contact #1 (in case parents cannot be reached)

Name: _____ Relationship to Child: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work: _____ Cell: _____

Emergency Contact #2 (in case parents cannot be reached)

Name: _____ Relationship to Child: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work: _____ Cell: _____

Emergency Contact #3 (in case parents cannot be reached)

Name: _____ Relationship to Child: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work: _____ Cell: _____

Emergency Contact #4 (in case parents cannot be reached)

Name: _____ Relationship to Child: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work: _____ Cell: _____

I authorize Hobson Preschool to contact any of the above named persons to pick up my child in the event I cannot be reached.

Parent's Signature _____

Date: _____



CONSENT FOR EMERGENCY MEDICAL CARE

I/We, _____ father, mother, guardian
of _____ do hereby request and give
consent to the Director of the facility, or her duly appointed representative, for said child to receive such
medical or surgical aid as may be deemed necessary and expedient by a duly licensed health care
provider in case of emergency when the parent(s) cannot be reached. Consent is also given for the
Director or her duly appointed representative to transport said child for emergency medical treatment,
if the parent(s) cannot be reached, including emergency transportation.

Signed _____ Witness _____ Date _____

Signed _____ Witness _____ Date _____

Doctor's Name _____ Phone Number _____

Address _____ City _____ State _____ Zip _____

Developmental History

(Please fill out relevant information pertaining to your child)

Physical/Emotional problems your child may have: _____

Special Diet Needs: Diabetic _____ Food Allergies _____

Other Medical Issues we should know about: _____

Child requires assistance in: Dressing _____ Toileting _____

Eating _____ Washing Hands _____

Is child toilet trained? _____ Words used for toileting: _____

Favorite Games, Toys, and Hobbies: _____

Previous Childcare/Preschool Experience: _____

Home Language or Languages: _____

Special cultural holidays and events celebrated in the home: _____



Consent/Permission Form

Child's Name _____

Date of Birth _____

Parent/Guardian Name _____

Insect Repellent/Sun Block:

During warm and humid weather, we are requesting your permission to use insect repellent and sun block before going out onto the playground. Please check the appropriate response below.

Insect Repellent _____ Yes _____ No

Sun Block _____ Yes _____ No

Photo Release Consent:

I give consent for pictures to be taken of my child to be used in the program promotion. Photographs may be used in news release items, slides, website updates or other related material. Please check the appropriate response below.

_____ Yes _____ No

Ages and Stages Screening (3) is a screening tool used to detect developmental delays in children 18 months through 4 years of age.

I give Hobson Preschool permission to screen my child.

_____ Yes _____ No

Kindergarten Readiness Program:

The Department of Human Services is providing "A Getting Ready for Kindergarten Calendar" for the parents of all of our three, four, five year olds as part of the Kindergarten Readiness Program. This is in accordance with Legislative Act 825 enacted by the Arkansas General Assembly to insure all of our children are paired for Kindergarten. Your signature below indicates that you have received a calendar.

Parent or Guardian Signature: _____ Date: _____



Hobson Preschool Enrollment Requirements

Dear Parents,

The following items must be provided to Hobson for a child to be enrolled:

- Completed Enrollment Form
- Enrollment Fee Paid
- Immunizations current and a record provided

If a child has not met all of the above criteria by the first day of the school term, the child is subject to dismissal from the Hobson program.

In this packet, you will find your copy of the Hobson Parent Handbook, which explains Hobson philosophy and policies. Please sign below stating you have read the handbook and understand it.

Thank you and we look forward to a successful school year!

Parent/Guardian Signature

Date



Hobson Preschool Policy Acknowledgement

Tuition Policy:

Enrollment fees are non refundable. Parents must give a 30 day written notice to the school if the family moves or it becomes necessary for the child to be withdrawn for any reason. All tuition paid by check should be made payable to the school. You may pay with automated withdrawal, personal check or cash.. ACH payments will be withdrawn on the 15th of each month with the exception of August, which will be withdrawn on August 31st of each year. A \$20.00 return check fee will be assessed on all returned ACH payments or returned checks. Tuition past due over 30 days will result in the student being dropped from enrollment. Tuition may be paid monthly, semi annually, or annually using the ACH plan or by check or cash if you chose semi-annual or annual. All tuition is based on the yearly cost of the program. No deductions are made for holidays or illness. Hobson follows the closure policy of the Fort Smith Public Schools; however there are no make-up days for missed days or classes.

Late Pick-Up Policy:

Hobson charges \$1.00 per minute, per child, late fee for each minute that a parent is late past the designated pick up time of 6:00 P.M. The school clock serves as the official time. Gates will close at 6:00 P.M.: parents need to come to the office to pick up their child after the gates are closed. At this time, you will receive a late pick-up slip with the time and fee noted on it. The fee will be assessed and due at the time of pick-up. Thank you for being conscientious in picking up your children on time. Your cooperation in this matter is greatly appreciated.

Discipline Policy:

Hobson follows the following policy in regards to discipline:

When a student misbehaves, we: 1) state what is expected of him in positive terms and 2) redirect him into another less frustrating activity, or 3) change the environment, or 4) let him work off tensions with play dough, outdoor play, etc. or, 5) as a last resort, have him sit apart from the group temporarily and watch other children play. Physical punishment is NOT used with child.

A conference will be scheduled with a parent if the discipline problem persists. This is done in a positive way to engage the cooperation of the parent.

I hereby agree to comply with the policies, rules, and regulations of Hobson Preschool regarding fees, attendance, health, parking, clothing, and other issues as listed by this from and Parent Handbook issued yearly.

Parent or Guardian Signature: _____

Date: _____



Volunteer Form

To: All Parents, Guardians and Caregivers

From time to time, we need **volunteer assistants** to help us enrich our childcare **education program**. Please indicate in which of the following areas you would like to help:

- _____ Computer Instruction
- _____ Photographing or videotaping children at play
- _____ Coordinating and assisting with walking field trips
- _____ Helping children with gardening
- _____ Helping children with cooking
- _____ Playing a musical instrument for the children
- _____ Reading to the class
- _____ Share a talent or hobby
- _____ Provide items of interest or supplies for the classroom
- _____ Provide snacks for the classroom
- _____ Presentation/Demonstration pertaining to your business background or special interest

If you are interested, please sign and date below and return this form with your child's enrollment package.

Signature: _____ Date: _____

Volunteer Substitute Teachers:

From time to time we have the need for **volunteer substitute teachers**. Your qualifications need only be your willingness to occasionally substitute for a teacher or an aid. Each substitute will need to complete the Arkansas Criminal Background Check and Arkansas Child Maltreatment Background Check forms and have a current TB Skin test card on file in the office. The background check forms are available in the school office.

If you are interested, please complete and sign this form and return with your child's enrollment form.

Name: _____

Days Available: Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Signature: _____ Date: _____



Tuition Automatic Bank Draft Authorization Form

This form authorizes First Presbyterian Church to auto draft tuition funds on behalf of Hobson Preschool. These auto drafts will be processed on the 15th of each month, with the exception of August which will be done on August 31st of each year.

Name on Account: _____

Name(s) of child(ren) attending Hobson: _____

Authorization: I hereby authorize Hobson Preschool of the First Presbyterian Church (Hobson) to automatically draft tuition deductions from my account listed below, and the Financial Institution below to post the same to such account. I further authorize Hobson to initiate necessary credit entries and adjustments for any erroneous debit entries previously initiated, and I authorize the Financial Institution to accept the amount of such entries to my account. This authorization is to remain in force until Hobson receives notice of cancellation from me. The notice of cancellation must be received at least 30 days prior to cancellation and in such a manner as to afford Hobson and the Financial Institution reasonable opportunity to act on it, and in no event shall it be effective with respect to entries processed prior to the receipt of the notice of cancellation. This authorization replaces all prior tuition automatic draft authorizations submitted by me.

Financial Institution City, State Account # Account Type: Checking/Savings

*****MUST ATTACH A VOIDED CHECK FOR CHECKING ACCOUNTS*****

*****MUST ATTACH A DEPOSIT SLIP FOR SAVINGS ACCOUNTS*****

Agreement: understand it is my responsibility to verify the tuition deduction. Any discrepancies should be reported to the financial secretary or the Financial Institution immediately. I will not hold liable First Presbyterian Church or Hobson Preschool & Kindergarten for any errors in deduction.

Signature of Account Holder: _____ Date: _____

Cancellation: I hereby cancel the authorization for Hobson to originate tuition deduction entries to my account indicated above, effective on (date) _____

Signature of Account Holder: _____ Date: _____



Hobson Preschool 2017-2018 Tuition Schedule

Yearly Enrollment Fee for All Ages:	\$150.00
Weekly Tuition Fee for All Ages: 9:00A.M.-2:00P.M.	\$100.00
Weekly Early Bird Fee: 7:30A.M.-8:45A.M.	\$20.00
Weekly After School Fee: 2:00P.M.-6:00P.M.	\$35.00
Monthly Tuition Fees for All Ages: 9:00A.M. -2:00P.M.	\$400.00
Monthly tuition Fee: Early Bird plus 9:00A.M.-2:00P.M.	\$480.00
Monthly Tuition Fee: Early Bird plus 9:00A.M.-6:00P.M.	\$620.00
Monthly Tuition Fee: 9:00A.M.-6:00P.M.	\$540.00
Yearly Tuition Fee for All Ages(Based on 9 ½ Months):	\$3800.00
Yearly Tuition Fee: Early Bird plus 9:00A.M.-2:00P.M	\$4560.00
Yearly Tuition Fee: Early Bird plus 9:00A.M-6:00P.M.	\$5890.00
Yearly Tuition Fee: 9:00A.M.-6:00P.M.	\$5130.00

Tuition is due on the 1st of each month and is late if paid after the 15th. A late fee of \$25.00 will be added to any account paid after the 15th, with the exception of those accounts set up for auto draft.