

Acceptance Form

This is to confirm that:

Child 1: _____ DOB: ____/____/____ Class: _____

Child 2: _____ DOB: ____/____/____ Class: _____

Child 3: _____ DOB: ____/____/____ Class: _____

Has been accepted for care by PARKVIEW CHRISTIAN CHILDCARE CENTER and a place will be reserved until the first day of care which will begin on: ____/____/____

Name: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Address: _____

By signing below, you agree that this is a legally binding form. Providing false information could result in termination of childcare services, forfeiture of retainer, or both.

Father/Guardian's Signature	Date
Mother/Guardian's Signature	Date
Accounts Receivable/Signature	Date

Tell us about your child:

What school did your child last attend?

How does your child interact/communicate with teachers and other children?

Is there anything specific that we need to know about your child?

For ages 3 and above only: Is your child completely potty trained?

Yes

No

POTTY TRAINED- Potty-trained is when a child has the ability to ask the teacher to use the toilet, and when the child has the ability to use the restroom properly without assistance and can cleanly wipe his/herself.

ELIMINATION ACCIDENTS- If a child had three (3) accidents concerning elimination within a 5-day period (starting from the date of the first accident and not counting weekends) the child **must** be withdrawn for a minimum of two (2) weeks for additional training. Tuition is still due to secure the child's enrollment in the class.

Here at Parkview Christian Childcare Center, enrollment shall be open to any child, provided the child meets the age requirement of the Center, and if we are able to meet the needs of that child. The Director and the teacher will decide if a child's physical, emotional, social, or intellectual conditions prohibit or inhibit the child's acclimating into the program. We will make reasonable accommodations to fit all children into the program. If your child cannot adjust, we recommend that you withdraw your child. However, all efforts will be made to accommodate your child before this is necessary. Enrollment shall be granted without discrimination in regard to sex, race, color, disability, or national origin.

Parkview Christian Childcare Center (PCCC) and Parkview Christian Academy (PCA) are ministry arms of Parkview Baptist Church (PBC) Waco, Texas. As such, both ministry arms have the same goal and objective of presenting the Gospel of Jesus Christ in all things, and living out the commands, morals, and precepts of the Bible. PPC, PCC, and PCA are each governed principally by the Bible, God's Inspired Word for Christian living and life, and secondarily by the Constitution and By-Laws and Statement of Faith of PBC.

Each child enrolled at the childcare, from birth through 5 years of age, must meet applicable immunization requirements. We must have a current shot record in their file by their enrollment date. No exemptions or exceptions. The following information must be on the immunization record:

1. Child's name and birth date
2. Number of doses and vaccine type
3. Month, day, and year your child received each vaccination
4. Signature of the physician or general practitioner who administered the vaccine.

A registration fee of \$_____ has been received. (NON-REFUNDABLE)

First week fee of \$_____ has been received.

Book fee of \$ _____ has been received.

These fees will not be returned in the event that the above-named child(ren) is not placed on care by the above date. Payment is due the Friday prior of next week's care OR NO LATER THAN MONDAY AFTERNOON. A \$30.00 late fee will be charged to your child(ren)'s account that Monday at 6pm if payment has not been received.