

Registration Form

Early Childhood & After School



School Year _____

Start Date _____

Child Information:

Child's Name: _____ Prefers: _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Gender: _____ M / _____ F

Home Phone: _____ SS#: _____

Ethnic Origin: _____ American Indian _____ Caucasian
_____ Asian _____ Hispanic
_____ African American _____ Other

Family Information:

Mother

Father

Name: _____

Name: _____

Address: _____

Address: _____

(If different from child above)

(If different from child above)

City: _____ St: _____ Zip _____

City: _____ St: _____ Zip _____

Home Phone: _____

Home Phone: _____

Cell Phone: _____

Cell Phone: _____

E-mail: _____

E-mail: _____

Work Phone: _____ ext# _____

Work Phone: _____ ext# _____

Place of Employment: _____

Place of Employment: _____

Sibling names & ages: _____

Church Affiliation: _____

To prevent duplicate mailings please check:

Holy Cross member _____ Holy Cross Employee _____

Siblings in: Academy _____ Preschool _____ Daycare _____

Current School Attending: _____

Name of school: _____ Current Grade: _____

Emergency Contact

Name: _____ Relation to child: _____

Address: _____

Phone: _____ Cell phone: _____ Wk phone: _____

Name: _____ Relation to child: _____

Address: _____

Phone: _____ Cell phone: _____ Wk phone: _____

Child's Health Issues:

Physician Name & Phone number:

Allergies/Health

Problems: _____

Medical Release: I authorize Holy Cross Lutheran Academy (Early Childhood) to seek emergency treatment for my child. I give permission to the emergency physician to secure proper emergency treatment and to order injection, anesthesia, or other emergency treatment if I (we) cannot be contacted. It is understood that a conscientious effort will be made to locate my spouse or me before action is taken. But if it is not possible to locate us, I accept the expense. In the event of life-threatening emergency, I understand that "911" will be called to take my child to my preferred hospital _____ if possible, or to the closest facility.

Picture Release: From time to time Holy Cross Lutheran Church and Academy will be taking pictures of your child to document activities at school. Some of these pictures may be used for promotion and publicity. I grant permission for HCLA to take pictures of my child, for use in school and church publications and for promotional purposes.

Parent/Guardian Signature: _____ Date: _____

Child Release Form

Child Name: _____ Parent Signature: _____

I authorize Holy Cross Lutheran Academy to release my child for pick up to the following persons:

Name: _____

Phone Number: _____

Relationship to child: _____

Name: _____

Phone Number: _____

Relationship to child: _____

Name: _____

Phone Number: _____

Relationship to child: _____

Name: _____

Phone Number: _____

Relationship to child: _____

DO NOT Release Form

Please **DO NOT** allow the following person(s) to pick-up my child:

Name: _____

Phone Number: _____

Relationship to child: _____

May they visit the child? YES NO

Name: _____

Phone Number: _____

Relationship to child: _____

May they visit the child? YES NO

EARLY CHILDHOOD DISCIPLINE STATEMENT

402.305 (12) Child Discipline

Minimum standards for child discipline practices shall ensure that age-appropriate, constructive discipline practices are used for children in care. Such standards shall include at least the following requirements:

1. Children shall not be subjected to discipline, which is severe, humiliating or frightening.
2. Discipline shall not be associated with food, rest, or toileting.
3. Spanking or any other form of physical punishment is prohibited.

Above are the minimum requirements set by the State of Florida. At Holy Cross we have gone beyond those standards to include the following:

If a behavior problem arises, the teacher will try to redirect your child.

If your child is a disturbance, he/she may be removed from the group or classroom until the situation can be resolved.

If needed, an incident report will be filed and the parents/guardians will be informed of the behavior. We will work together to alleviate the problem.

The children can realize and appreciate defined expectations. They will see that we deal with problems with Christian love and concern.

HCLA reserves the right to discharge any student if:

- A. The Teacher and the Director agree that a specific child is disruptive to the total environment. Including, but not limited to, inappropriate language, hitting, biting, or disrespect to other children or adults.
- B. The Teacher and the Director agree that a child's needs could best be met in a setting other than Holy Cross Lutheran Academy.

Such action will only occur after consultation with all parties involved, and only if there is no other reasonable resolution for the situation.

Parents and teachers are responsible, and agree, to follow the same disciplinary guidelines set by the State of Florida, and Holy Cross Lutheran Academy, while on our property.

By signing below, you, your spouse and/or all other legal guardians verify that you have received the above information, and agree to abide by these standards.

Child(ren) Name(s): _____

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____