

Central Baptist Church MDO
1991 FM 158
College Station, TX 77845

Summer MDO
M/W June 4-27

It's a Bugs Life

If you are registered for Summer MDO, complete the attached forms and return all of the following documents via email to mcole@centralbcs.org:

- General Information/Health Statement
- Tuition & Policy Agreement
- Dismissal & Permission Form
- Current Immunization Records
- Family Photograph

You must also set up a KidCheck account:

- If you attend Central and already have an account, we just need to make sure you have all guardians listed.
- If you need to set up an account, go to www.centralbcs.org/kidcheck for instructions
- If you have KidCheck questions, please contact me!

*All the above information must be received no later than the 1st day of class. Your child will NOT be allowed to attend until all requirements have been met.

DIRECTOR
Mary Cole
mcole@centralbcs.org
www.centralbcs.org/preschool

Central Baptist Church

Mother's Day Out

1991 FM 158 * College Station, TX * 77845 * (979) 776-9977 Ext. 230
Tax id #74-1193454

Child's Name: _____

Summer Monthly Tuition Fee Schedule:

Registration Fee: \$125.00 per child; due upon registration (non-refundable)

1 day only \$125.00 _____

Both days \$225.00 _____

Total Tuition Due : _____

Please initial each statement to acknowledge acceptance of terms.

- _____ I understand that the registration/supply fee is required to secure a spot for my child.
This fee is NON-Refundable.
- _____ I understand that summer tuition is due the first day of class and is NON-Refundable
- _____ I understand that there are NO make-up days for days missed
- _____ I understand that children not picked up BY 2:30pm will be left in the Director's care.
I will be subject to a late fee of \$5.00 for every 5 minutes.
- _____ I understand that I will not be allowed to register my child for the following school
year unless my current tuition is paid in full at the time registration.
- _____ I understand that I will have to set up a KidCheck account.
- _____ I understand and agree to the policies as stated in the Summer 2018 Policies &
Procedures Handbook.

Thank you for your cooperation and for making Central Baptist Church
Mother's Day Out a great success!

Parent/Guardian Signature _____ Date _____

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General Information:

Child's Name _____ Birthday _____

Name Child Goes By _____ Boy _____ Girl _____

Address _____ City _____ Zip _____

Email Address _____

Parent or Guardian _____ Parent or Guardian _____

Work Phone _____

Cell Phone _____

Health Statement

List any recent illness or chronic illness condition

List any Allergies _____ Epi Pen? _____

List any medication prescribed for long-term continuous use

If your child has been hospitalized within the past 12 months, please explain

Please list any conditions for which this child may require special treatment

Authorization for Emergency Medical Attention:

In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize the facility director or person in charge to take my child to;

Name of Physician _____ Address _____ Phone # _____

Name of Hospital _____ Address _____ Phone # _____

If I cannot be reached, please notify:

Name _____ Relationship _____ Phone # _____

Insurance Company _____ Insurance in name of _____ Policy # _____

Signature of Parent or Guardian _____

_____ Date

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Dismissal Form:

I, _____, give permission for my child, _____
to be released from Central Baptist Church MDO to the following persons and they each
must have a KidCheck account:
(Please include ALL names, including yourself) to

I understand that the above stated persons are the only individuals that my child will be released to. All of the above will need their identification for verification and listed as an authorized guardian in KidCheck.

If the child resists leaving with the above mentioned person(s), Central Baptist MDO reserves the right to seek further verification before releasing the child.

Permission Form

1. I give CBC MDO permission to release my child's name, address, and phone number to the school for;

School Party Lists::

_____ Yes _____ No

Other Parents for Birthday Parties:

_____ Yes _____ No

2. I give CBC MDO permission to take my child's pictures for use on crafts and other MDO materials (class collage, memory books, bulletin boards):

_____ Yes _____ No

Parent Signature

Date