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March 1, 2010

To: All Parents and / or Guardians  
From: Kenneth F. McCabe, Executive Director  
TLC Registration Instructions

To ensure that our licensing requirements from the CT Department of Public Health are met, it is **extremely important** to complete **ALL** information on your registration forms.

Please be careful to complete all information requested on all of the forms, even if it may be redundant. (If a question does not apply to you, please put N/A in that space).

Read each question carefully; if you are unsure of how to answer, feel free to contact (call or email) the office for assistance. **The following items must accompany your registration:**

- 1) Completed registration form (please remember to have **ALL financially responsible parents/step-parents/guardians sign pages 3, 5, 6, 7 and initial pages 8 and 9**).
- 2) The State of Connecticut Health Assessment Form. **It must be completed both front and back and be dated within the past 3 years.** This form is attached to your registration packet\*/\*\*. Pre-school Health forms **can not** be used. **Please advise your child's healthcare provider to complete all areas pertaining to Tuberculosis, including the date of the test and the result.**
- 3) A copy of your child's medical insurance card. If your child does not have medical insurance please contact the office for a copy of a waiver to sign.
- 4) Registration fee of \$60 (one child), \$30 for each additional child.

\*New Kindergarten parents; You may return the registration forms without the Health Assessment Form, but please indicate when your child's 5 year check-up will occur. **You must mail the Health Assessment Form, both front and back (or copy of) to the TLC office before your child can be officially accepted into the TLC program.**

\*\*Returning TLC families; If TLC has a current Health Assessment Form on file (good for up to 3 years from the last check-up date listed on back of form in upper right corner), there is no need to submit a new Health Assessment Form. **Please check with the TLC office as to what check-up date TLC has on file for your child.**

To enable us to serve you and your child/children appropriately, we must have all of this information completed. The TLC office is available to assist you with any questions. **Incomplete registration forms will be returned to applicants. This will delay your placement in our program.** We recommend that you review your application after completion to insure each item is filled in completely.

Thank you for choosing Trumbull Loves Children, Inc. to care for your child/children.

# T L C REGISTRATION 2010 - 2011

## General Information

Attached are the necessary forms to enroll your child in TLC for the 2010 - 2011 school year. Please read everything carefully and save all information for future use.

**PLEASE REVIEW THE REGISTRATION SCHEDULE**

**Group A: March 1 – March 12**  
Returning TLC Families and Siblings Only

**Group B: March 15 – March 31**  
New Enrollees - Full-time: 5 days a week  
Group A registrations received after March 13th

**Group C: April 1 – April 16**  
Open Enrollment  
Full-time: 5 days a week and Part-time: less than 5 days a week

All registrations are accepted on a first-come, first-served basis by group

Completed registration forms may be mailed to:

**Trumbull Loves Children, Inc.**  
**P.O. Box 162**  
**Trumbull, CT. 06611**

*See reverse side for answers to some common registration questions ...*

### When will I find out if my child is enrolled?

Starting April 1, 2009 we will begin sending out acceptances on a rolling admissions basis. We will make every effort to notify parents as soon as possible.

### What do I do if my child is not accepted?

Unfortunately, State licensing regulations limit the number of children we can care for within each center. Because of this, waiting lists can be a reality at any center. If we are unable to enroll your child, you will be notified by telephone and by mail. Upon notice that we are unable to accommodate your child's requested schedule, you will have the option of receiving your registration fee back and finding alternate care or being placed on our waiting list. If you are placed on a waiting list, we will inform you as soon as there is an opening. It's important to know that we receive many schedule changes and withdrawals throughout the summer months, and we will inform parents of their updated status as soon as possible. In addition, a good source for potential alternative licensed family daycare facilities is Info-Line at (800) 505-1000.

### If my child's schedule changes, how do I let you know?

We need to know as soon as possible if there is any change in your child's schedule. Spaces in the after school time slot (3:20–6 p.m.) are taken very quickly, and many parents are disappointed that we are unable to accommodate their child. **You must submit in writing/e-mail to the TLC office, your intent to withdraw your child by August 2, 2010. Failure to provide such notice will result in TLC retaining your 50% deposit of September's program fee.** If you need to reduce or add to your schedule, please let the TLC office know as soon as possible so that we can make our best efforts to fulfill your requests. In order to have accurate attendance lists for the start of school, **no schedule changes or registrations will be accepted between August 13th & Sept. 13th.** (e-mail TLC at info@tlctrumbull.com)

### When will I owe my first payment?

Once we have enrolled your child, we will send a confirmation letter which will include the amount of your monthly fees. You will need to send 50% of your September program fee to TLC by **July 16, 2010.** The remaining 50% of the September program fee must be paid by the first day of school August 31, 2010. Failure to make scheduled payments could result in TLC giving your child's spot to another child.

### What is the Fun Zone Center?

The Fun Zone is TLC-owned space which enables us to provide more appropriate after-school programming for TLC 4th and 5th graders. The Fun Zone Center is located directly behind Daniels Farm School. As in previous years, 4th and 5th grade students from Trumbull's elementary schools (participating schools will be decided by TLC before school begins) will be bused after school to The Fun Zone Center. (If an elementary school does not participate, then the 4th and 5th graders will remain after school at that school). Discounted rate provided for the Fun Zone. See fee page.

### I have two children in the program. Can I just fill out one form for both?

**No,** State licensing requirements dictate that every child in the program must have a completed registration form.

### My child has allergies/asthma. Can TLC handle this?

State Licensing requires TLC staff to be trained to administer Epi-pens, Inhalers & Benadryl. TLC Medical Authorization forms must be completed for each type of medicine that might need to be kept at TLC. The TLC office and center staffs will do their best to make you comfortable and confident that your child is well cared for.

### What should I send with my registration?

Please facilitate the registration process by ensuring that the following items are included with your registration:

- Completed registration form (please remember to have both financially responsible parents, step-parents and/or guardians sign pages 2, 4 6, and initial pages 3 and 5).
- CT Health Assessment Form – this is required if your child is new to TLC, entering kindergarten, third or sixth grade (please note that current forms on file with us are only valid for 3-years from the date of your child's last physical exam).\*\*
- Copy of your child's medical insurance card
- Registration fee of \$60 (one child), \$30 for each additional child.

**Your registration will not be accepted if the registration form is not complete or registration fee is not included.**

### \*\*My child's physical is not scheduled until after March. Will my registration be returned?

If your child's physical exam is scheduled for after March, please indicate date of exam on the registration form. Do not delay returning the rest of the registration forms back to TLC. School policy dictates that every child must have had the approved immunizations prior to the start of school, and TLC adheres to the same policy. **TLC must receive an up to date medical form before the start of school.**

### I don't know if my child is in AM/PM kindergarten.

Designation of morning or afternoon kindergarten comes directly from the BOE Transportation Department (early July). In the Kindergarten Care section, simply check off which days you would like your child enrolled. When we find out the AM/PM designations from the BOE, we will assign your child to the appropriate TLC session. Until the AM/PM kindergarten sessions are designated, Kindergartners are only conditionally accepted into the TLC program.

## SCHOOL DISTRICT BUS POLICY

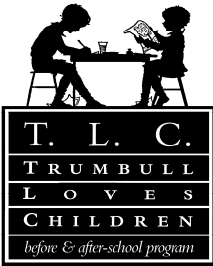
### Can my kindergarten child go on the bus?

**TLC has the following arrangement with the Board of Education's Transportation Department:**

**Full-time (5 days/week) in TLC**—Full-time TLC children who attend the morning TLC kindergarten session, and go to school in the afternoon, may arrive at TLC on the 8:35 AM regular school bus, if there is space. Likewise, children who go to school in the morning, and attend the afternoon kindergarten session at TLC, may ride home on the 3:20 PM school bus, again if there is space. If TLC students cause the bus to be over capacity, you will be notified. Remember the 8:35 and 3:20 buses have designated stops on the routes, and additional stops will not be made to accommodate students who are returning home from TLC in the afternoon or students who are riding from home to TLC in the morning.

**Part-time (2-3/days) in TLC**—Part-time TLC kindergarten students may ride the 8:35 AM and 3:20 PM buses on TLC days, again if there is space, **BUT the Transportation Department will not provide a "middle-of-the day" Kindergarten bus to your home from school or from your home to school on the days your child does not attend TLC.** TLC works very closely with the BOE's Transportation Dept. to provide the safest transportation for our students. If you have any questions, please contact the TLC office at 452-9626.

Mother's Initial \_\_\_\_\_ Father's Initial \_\_\_\_\_



# REGISTRATION FORM

## TLC 2010-2011

**School: (please check appropriate location)**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Booth Hill (K-3 <sup>rd</sup> )                             | <input type="checkbox"/> Jane Ryan (K-3 <sup>rd</sup> )                             | <input type="checkbox"/> Tashua (K-3 <sup>rd</sup> )                           |
| <input type="checkbox"/> Booth Hill Fun Zone* (4 <sup>th</sup> & 5 <sup>th</sup> )   | <input type="checkbox"/> Jane Ryan Fun Zone* (4 <sup>th</sup> & 5 <sup>th</sup> )   | <input type="checkbox"/> Tashua Fun Zone* (4 <sup>th</sup> & 5 <sup>th</sup> ) |
| <input type="checkbox"/> Daniels Farm (K-3 <sup>rd</sup> )                           | <input type="checkbox"/> Middlebrook (K-3 <sup>rd</sup> )                           | <input type="checkbox"/> Hillcrest (6 <sup>th</sup> – 8 <sup>th</sup> )        |
| <input type="checkbox"/> Daniels Farm Fun Zone* (4 <sup>th</sup> & 5 <sup>th</sup> ) | <input type="checkbox"/> Middlebrook Fun Zone* (4 <sup>th</sup> & 5 <sup>th</sup> ) | <input type="checkbox"/> Madison (6 <sup>th</sup> – 8 <sup>th</sup> )          |
| <input type="checkbox"/> Frenchtown (K-5 <sup>th</sup> )                             |   |  |

**\*The Fun Zone is located behind Daniels Farm Elementary School. Fun Zone designation will not be determined until enrollment numbers are finalized.**

**STUDENT INFORMATION**

Child's Name: \_\_\_\_\_ Sex:  Male  Female

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade going into: (2010-2011) \_\_\_\_\_ Teacher: (if known) \_\_\_\_\_

Home Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Starting Date (other than first day): \_\_\_\_\_ (First day of school is scheduled for August 31, 2010)

**SCHEDULE INFORMATION** Please check all days and times needed

**TLC (Elementary School Program K thru 5<sup>th</sup> grade)**

- |  |  |
|--|--|
| <b>Registration For:</b>   | (Please check days needed – 2, 3, or 5)  |
|  | <b><u>Mon</u> <u>Tues</u> <u>Wed</u> <u>Thurs</u> <u>Fri</u></b>   |
| Before School 7:00 – 8:30  | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <b>**</b> Kindergarten Care  | (Please check days needed – 2, 3, or 5)  |
| In TLC for <input type="checkbox"/> AM Slot <input type="checkbox"/> PM Slot | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| After School 3:20 – 6:00   | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

**ASP (Middle School Program 6<sup>th</sup> thru 8<sup>th</sup> grade)**

- |                          |  |
|--------------------------|--|
| <b>Registration For:</b> | (Please check days needed – 1, 2, 3, 4, or 5)  |
|                          | <b><u>Mon</u> <u>Tues</u> <u>Wed</u> <u>Thurs</u> <u>Fri</u></b>   |
| After School 2:35 – 6:00 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

**\*\*** The Board of Education (BOE) will provide designation of morning or afternoon kindergarten session by July 2010. If enrolling prior to July, leave the AM/PM slot blank. TLC will receive designation information from the BOE, and will automatically place your child in the correct TLC Kindergarten time slot. If enrolling after July, please check the appropriate AM/PM box for when your child will be at TLC. AM slot is 8:30 to 11:45 and PM slot is 12:05 to 3:20.

If your child is attending the TLC Kindergarten ONLY (no Before/After School above), he/she will be:  
 Picked-up/Dropped-off by Parent  Ride the Before School Bus and/or After-School Bus #: \_\_\_\_\_  
 Please refer to attached information sheet regarding the BOE Transportation's bus policy, especially if you intend to register your child for less than five days per week. TLC notifies the Transportation Dept. when a kindergartner enters or withdraws from TLC.

**The BOE does not provide a mid-day bus for part-time TLC Kindergarten children.**

**\*Please see page 3 of registration packet for BOE policy.**

**YOUR APPLICATION WILL BE RETURNED IF PAYMENT, INFORMATION, SIGNATURES OR FORMS ARE MISSING.**  
**THIS WILL DELAY AND POTENTIALLY EFFECT THE ENROLLMENT PROCESS.**

### Parent Information (all information must be completed in full)

**MOTHER** Name: \_\_\_\_\_ Home Telephone #: (\_\_\_\_)\_\_\_\_-\_\_\_\_

Home Address (if different from student): \_\_\_\_\_

Work #: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Ext. \_\_\_\_\_ Cell #: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Additional #: (\_\_\_\_)\_\_\_\_-\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Street Address: \_\_\_\_\_

Employer City, State & Zip: \_\_\_\_\_

Work e-mail\*: \_\_\_\_\_ Home e-mail\*: \_\_\_\_\_

**FATHER** Name: \_\_\_\_\_ Home Telephone #: (\_\_\_\_)\_\_\_\_-\_\_\_\_

Home Address (if different from student): \_\_\_\_\_

Work #: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Ext. \_\_\_\_\_ Cell #: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Additional #: (\_\_\_\_)\_\_\_\_-\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Street Address: \_\_\_\_\_

Employer City, State & Zip: \_\_\_\_\_

Work e-mail\*: \_\_\_\_\_ Home e-mail\*: \_\_\_\_\_

**\* In an effort to go green in regards to billing and prompt correspondence, please provide your primary email address. This is for TLC use only. TLC will never provide your email address to any second parties.**

**Preferred parent for staff to contact in case of illness or problem:**  Mom **or**  Dad

**At:**  Home **or**  Work **or**  Cell

\*\*\*\*\*

### **Emergency Information - *TLC requires two (2) LOCAL emergency contact numbers other than child's parents or guardians.***

If I am unable to pick my child up for any reason, including illness, early dismissal for inclement weather or any other emergencies, the following people are authorized to pick him/her up:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home #: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Work/Cell #: (\_\_\_\_)\_\_\_\_-\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home #: (\_\_\_\_)\_\_\_\_-\_\_\_\_ Work/Cell #: (\_\_\_\_)\_\_\_\_-\_\_\_\_

**Mother's Signature:** \_\_\_\_\_ **Father's Signature:** \_\_\_\_\_

### **TLC Scholarship Fund**

The TLC Scholarship Fund helps those with financial difficulties in regards to monthly fees.

Do you wish to contribute to the TLC Scholarship Fund?  Yes  No Amount Enclosed: \_\_\_\_\_

## ABSENT PARENT'S CONSENT FOR EMERGENCY TREATMENT FOR MINORS

I, \_\_\_\_\_, authorize any licensed physician to provide proper treatment, order injections, hospitalize, give anesthesia or perform surgery for my child or order any necessary treatment for my child while in the care of Trumbull Loves Children, Inc, (hereafter TLC Inc.) from August 2010 through June 2011.

I also authorize any TLC, Inc. staff member or EMS personnel to administer first-aid and give permission for the transportation to the hospital by emergency vehicle of my child \_\_\_\_\_, while in the care of TLC, Inc. This authorization is given in order to avoid unnecessary delay in emergency treatment.

If the situation permits, I prefer the following hospital (circle one): Bridgeport Hospital or St. Vincent's Hospital

**All reasonable effort will be made to contact:**

Mother's Name: \_\_\_\_\_ Home Phone #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

Work #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_ Ext. \_\_\_\_\_ Cell #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_ Additional #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

Father's Name: \_\_\_\_\_ Home Phone #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

Work #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_ Ext. \_\_\_\_\_ Cell #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_ Additional #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

**If TLC is unable to contact this child's parents/guardians in an emergency situation, whom should TLC contact? Please identify 2 local contacts:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_ Work/Cell #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_ Work/Cell #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

**Persons NOT allowed to pick up my child:**

Names and relationship: \_\_\_\_\_

*\*A copy of the court order is required to prevent pick up by a parent. If there are custody issues with regards to pick ups on select days please make us aware as well.*

Medical Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

**(Please attach a photocopy of the insurance card. It is mandatory that all TLC students have medical insurance, or a signed waiver is required. Contact the TLC Office for a waiver, if necessary).**

**Are there any Medical or other conditions that TLC should be aware of to care for your child?** \_\_\_\_\_

**Please list all prescription/important medications your child is taking, in the event emergency treatment is needed\*:**

\*It is your responsibility to notify TLC of any prescription/important medication changes.

**Mother's Initials** \_\_\_\_\_

**Father's Initials** \_\_\_\_\_

**(Additional information on reverse side)**

Does your child have a prescribed inhaler?  Yes  No Will you be providing this inhaler to TLC?  Yes\*\*  No

Allergies: \_\_\_\_\_

Does your child have a prescribed EPI-Pen?  Yes  No Will you be providing this EPI-Pen to TLC?  Yes\*\*  No

**All medication must be provided to TLC on the first day of service and must be in their original packaging.**

**\*\* TLC must have a "TLC Administration of Medication" form on file for each medication given to TLC. TLC will not accept a "Trumbull Public School Administration of Medication" form. The form must be from TLC and can be found on the TLC website: [www.tlctrumbull.com](http://www.tlctrumbull.com) or by calling the TLC Office at 452-9626.**

**A new Department of Public Health regulation requires that any medical, behavioral, social, emotional, developmental, or physical problems be documented in a TLC Child Care Plan. This plan is to be developed between the parent/guardians and a TLC Site Director. Should your child require a Care Plan, a form will be mailed home for you and your child's doctor to discuss, and then bring to TLC on your child's first day.**

**The following information must be filled out completely:**

Last DTP or DTaP (Tetanus) Shot: \_\_\_\_\_ Date of Last Physical: \_\_\_\_\_

Child's Physician or Clinic: \_\_\_\_\_ Telephone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Child's Dentist: \_\_\_\_\_ Telephone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mother's Signature: \_\_\_\_\_ Father's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

**AGREEMENT**

"I", "Me" or "My" refers to the parent(s) or guardian(s) signing at the bottom of this agreement.

I understand and agree to the following:

1. A \$60 non-refundable registration fee (\$30 for second and subsequent children) must accompany this registration form. The monthly fee shall remain fixed throughout the program year and is not contingent upon attendance or non-attendance, or sign-up days within any school month. There will be no reductions for short weeks or snow days, early dismissals or delayed openings. There will be no make-up days for short weeks, snow days, early dismissals, delayed openings or illness. Fees are not based on attendance.
2. **My monthly fee is due on the first of each month.** I understand that if payment is made after the 15<sup>th</sup>, I must pay a \$25 penalty. If the 15<sup>th</sup> falls on a holiday or weekend, payment must be received by the previous Friday. In the event that any monthly fees are not paid by the last day of each month, my child or children may be removed from the program without any further notice. I understand that by signing below I am responsible for the payment of all fees I may incur. If more than one person has signed this agreement, we both understand that each of us is responsible for the entire amount of any fees due, that is, we are jointly and separately responsible for our debts to TLC. If TLC commences legal action against me (or us) for any money owed, I (or we) will also be responsible for reasonable collection costs and reasonable attorney fees incurred by TLC.
3. **I agree to pre-pay 50% of my September program fees by July 16, 2010.** I understand that if I fail to make payment by the 16<sup>th</sup>, TLC will not guarantee my child/children's space in the program and may give my child's assigned slot to another child on TLC's waiting list. Conversely, failure to notify TLC of a decision to withdraw, or not to continue with the TLC program, will result in continued monthly billing for program space originally requested. **All withdrawal or schedule change requests/notifications must be communicated through the TLC Office, by phone and e-mail, not through a TLC center.**
4. **I agree to provide the TLC office with written/e-mail notice by August 2, 2010 if I intend to withdraw my child/children from the program.** I understand that if I fail to provide such notice, TLC will retain my 50% deposit of September's program fees. TLC e-mail is: [info@tlctrumbull.com](mailto:info@tlctrumbull.com)
5. After the start of school, I agree to provide the **TLC office** with two weeks, written/e-mail notice prior to withdrawing my child/children from the program. I understand that if I fail to provide such a notice, I am obligated to pay the applicable program fees for the two additional weeks from the date the **TLC office** receives a written or e-mail notice to withdraw (with exception to the month of September's withdrawal procedures – see # 3 above).
6. If I change my child's schedule more than one time during the school year, there will be a \$10 administrative charge, payable with the next month's fees, for each such change. When requesting a change of schedule, I must give the TLC office a two week notice (e-mail or written) prior to the needed schedule change to be implemented.
7. **It is my responsibility to notify the TLC office of any changes to either parent, step-parent or guardian listed in the Parent Contact Information section of this application (i.e. change in employer, employment status, work phone numbers, cell phone numbers, home phone numbers, home addresses or e-mail addresses).** TLC reserves the right to verify my employment and employer.
8. The centers are open five days a week, Monday through Friday and follow the school calendar. The elementary center hours of operation are 7 a.m. - 6 p.m. (ASP hours of operation are 2:35 p.m. - 6 p.m., and The TLC Fun Zone's hours of operation are 3:20 p.m. to 6:00 p.m.). All children must be picked up promptly by 6 p.m., and I understand I will be obligated to pay a late charge in the event that I am not able to pick-up my child/children by 6 p.m. Should lateness become a chronic problem, I understand that I may be required to remove my child/children from the program.
9. My child must be covered by my family's accident/medical insurance policies. Evidence of such insurance must accompany this application. **If my child does not have insurance, I understand that I will have to sign a waiver.**

**Mother's Initials** \_\_\_\_\_

**Father's Initials** \_\_\_\_\_

**AGREEMENT continued...**

10. I must supply TLC with an up-to-date “State of Connecticut Department of Education” Health Assessment Record before my child can begin the TLC program. **Failure to supply TLC with the correct form, completed on both sides and up-to-date, will delay my child from beginning the TLC program.**
11. TLC program staff may consult with my child’s teacher, principal, or any administrative or supervisory person within the Trumbull Board of Education to determine his/her ability to function within the TLC program.
12. My child is accepted into the program contingent upon his/her and my ability to function cooperatively within the program. In the event that a problem arises during the school year that cannot be corrected, TLC reserves the right to remove my child/children from the TLC program.
13. When school is scheduled to be open for a half day, children enrolled in the after school time slot will come to TLC at the early dismissal time and must bring a lunch (Fun Zone children will go to the Fun Zone). We do not accept drop-ins on half-days or delayed openings; only children who are regularly scheduled to attend. When school unexpectedly closes early (i.e. – due to inclement weather), TLC will also close early, and children must be picked up **within two hours** of school closing. (Fun Zone children will remain at their elementary schools). TLC will make reasonable efforts to notify parents should the centers close for any emergency reasons, but if I have any doubt, I understand it is my responsibility to check with TLC by telephone. Local radio/television stations will be notified to broadcast this information, as well as our website, [www.tlctrumbull.com](http://www.tlctrumbull.com).
14. I am responsible for notifying my child’s TLC center if my child will not be attending, as scheduled, on any particular day. Failure to notify TLC of absence will result in a \$25 penalty after one warning.
15. If my child/children is/are ill or an illness develops during the day as determined by TLC personnel, I (the parent/step-parent/guardian) or one of my designated emergency contact persons will be called to pick up my child.
16. **All children must be signed in and out by a parent or designated person.** If I am unable to pick up my child/children for any reason, I must provide a written note giving permission for a specific person to do so. In this note, I will specifically identify the person to whom I have given such permission, and I understand that this person shall be required to provide adequate identification to TLC personnel. If notification is not given, TLC will not authorize my child’s release.
17. I will regularly check for new information on the Parent Table/board, my child/children’s mail slots, web site, and I will pick up notices and newsletters made available on the Parent Table. Where feasible, I will participate in making the program a success by volunteering my time.
18. **Photographs may be taken of my child/children, which may be used in center bulletins, displays, newsletters, local newspaper articles and TLC’s web site. If I do not want photographs taken, I will notify TLC in writing.**
19. I understand that I will be provided a “Parent Handbook” at the beginning of the school year, and I agree to comply with all stated policies and procedures.
20. This “Agreement” and the documents attached to it, which include, “Registration Form”, “Parent Information”, “Absent Parent’s Consent for Emergency Treatment for Minors”, “State of CT Health Assessment Form”, and “Monthly Fees” comprise my entire agreement with TLC. Any changes to our agreement must be in writing.

Trumbull Loves Children, Inc. does not discriminate on the basis of race, sex, religion, national origin, or ancestry in admissions, employment, scholarship programs, or otherwise.

**Please make a copy of this agreement for your records.**

**Mother's Signature:** \_\_\_\_\_

**Father's Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## 2010 – 2011 MONTHLY FEES\*

TLC understands how these difficult economic times affect all our families, and has made every effort to minimize the impact of this by increasing fees the least amount possible. Please contact us if you are in need of additional financial assistance.

### ELEMENTARY SCHOOL PROGRAM

Time Slot	<u>1<sup>st</sup> Child Rate</u>			<u>2<sup>nd</sup>+ Child Rate</u>		
	5 days	3 days	2 days	5 days	3 days	2 days
Before School 7:00am - 8:30am	184	135	99	156	116	84
Kindergarten 8:30am - 11:45am or 12:05pm - 3:20pm	273	202	146	232	171	124
After School ** 3:20pm – 6:00pm	286	210	152	242	179	129
Before School and After School	443	327	237	377	277	202
Before School and Kindergarten	431	318	231	367	271	196
Kindergarten and After School	530	392	285	450	333	242
Before School, Kindergarten and After School	667	493	357	567	419	303
**After School FUN ZONE (excluding Daniels Farm students only)	269	198	142	229	169	122

**\*\* For FUN ZONE students (excluding Daniels Farm), because of the additional travel time for these students, TLC has adjusted their after-school rates accordingly.**

When more than one child from a family is attending TLC, the highest program fee will be designated as the first child, and additional children will be designated as second child.

For example, a family has a kindergarten child and a child in 2<sup>nd</sup> grade. Each child attends TLC after school five days per week. The Kindergarten child also attends the TLC kindergarten time slot. The fee will be calculated as follows:

1 <sup>st</sup> Child Kindergarten and After School	=	\$530
2 <sup>nd</sup> Child After School	=	\$242
Total monthly fees	=	\$772

### MIDDLE SCHOOL - AFTER SCHOOL PROGRAM (ASP)

After School Program 2:35pm - 6:00pm	<u>5-day</u>	<u>4-day</u>	<u>3-day</u>	<u>2-day</u>	<u>1-day</u>
	266	223	175	122	64
2 <sup>nd</sup> + Child Rate	226	192	149	104	55

**\*All fees are monthly effective August 31, 2010.**

Fees are based on a 10 month school year payable in 9 equal payments, plus a June fee equal to 75%.