



Nations Ford After-School Enrichment Program
5901 Nations Ford Road
Charlotte, NC 28217
www.nfckids.org www.nationsford.org
Office: (704) 521-6181
Fax: (704) 405-2171

Welcome Welcome Welcome

We are honored that you have selected Nations Ford Christian Academy as your choice for quality Christian education.

We supervise, support, and encourage our young people as they complete their homework lessons and participate in fun filled activities.

Please complete the enclosed enrollment packet and submit to the administration office along with your \$50.00 non-refundable registration fee. If you have any questions, comments, or concerns, please do not hesitate to give us a call at 704-521-6181.

Yours in Christ,

Folanda M. Malachi
Director



Nations Ford After-School Enrichment Program

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Application Date _____

Account Key: [_____] *Parent's last name*

Key Dates
Enrollment Date:
Withdrawal Date:

Child's Name	Sex	DOB
	M/F	

Parents' Name & Address

Parents' Social Security No.

Home Phone:

Work Phone: (Parent 1)

Work Phone: (Parent 2)

Cell Phone: (Parent 1)

Cell Phone: (Parent 2)

E-mail: (Parent 1)

E-mail: (Parent 2)

Child's Care and Emergency Information

Family Doctor Name & Number	Family Dentist Name & Number	Family Hospital Name & Number
Emergency Contact 1	Emergency Contact 2	Emergency Contact 3
Authorized Pickup 1	Authorized Pickup 2	Authorized Pickup 3

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Teacher Information Form

Name of Child (Last, First, Middle Initial)	Parents' Names

Child's DOB	Address	Home Phone
/ /		

Allergies, if any

Special Health Conditions, if any

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Parents' Locations during child-care hours (Employer, School, etc.)

Parent 1	Work Schedule & Address	Work Number:
		Cell:
Parent 2	Work Schedule & Address	Work Number:
		Cell:

Emergency treatment and transportation:

I hereby give permission to Nations Ford After-School Enrichment Program, licensed by the Division of Child Development, to secure emergency medical, dental and/or emergency surgical treatment and to provide emergency transportation for the above named minor child while in our care.

Non-emergency medical treatment or elective surgery is not included in this authorization.

Signature of Parent/Guardian

Date

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Medical History

Name of Child: _____ **Birth Date:** _____

Name of Parent or Guardian: _____

Address of Parent or Guardian: _____

Is child currently under a doctor's care? ___yes ___no If yes, for what reason?

Is child on any continuous medication? ___yes ___no If yes, what?

Any previous hospitalization or operations? ___yes ___no If yes, when and for what?

Any history of significant previous diseases/recurrent illness? ___yes ___no

Diabetes? ___yes ___no

Convulsions? ___yes ___no

Heart Trouble? ___yes ___no

Other? _____

Does your child have any physical disabilities: ___yes ___no If yes, please describe

Does your child have a mental disability (ies)? ___yes ___no If yes, please describe

Signature: _____ **Date:** _____

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Immunization History
 (Required for 5yrs old and up)

The childcare operator or health official must enter the received immunization date in the space below or attach a copy of the immunization record.

Enter date of each dose – Month/Day/Year

Vaccine	#1	#2	#3	#4	#5
*DTP/DT <i>(circle which)</i>					
**Polio					
Hib					
***Hepatitis B					
*MMR <i>(combined doses)</i>					
OTHER					

* Required by State Law

** Required by State Law for children born on or after 10/1/88

*** Required by State Law for children born on or after 7/1/94

Signature of Parent/Guardian

Date

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FIELD TRIP AUTHORIZATION

I, _____ give _____ permission to participate in any scheduled field-trips with Nations Ford After-School Enrichment Program. I understand that I will be notified of any such trips. I am responsible for any fees that may be involved. If a circumstance arises that prevents my child from participating, I understand that he/she will be placed in the care of another Nations Ford After-School Enrichment Program staff member until his/her class returns to the center. If my child is under the age of four (4) or weighs less than 40 pounds, I will provide an approved child restraint device. All children over four will be restrained in seat belts in order to conform with current state law.

Signature of Parent/Guardian

Date

Liability Release

Nations Ford Christian Academy “After-School Program” reserves the right to use photographs taken during after-school for publication purposes.

I/We as legal guardian (s) representing a minor participant, agree to release Nations Ford Community Church and Nations Ford Christian Academy, its officers, employees and volunteers from any and all liability for accidents, injuries, loss of and/or damage to my/our person or property that may arise out of my/our child’s participation in or presence at the above activity/activities. I/We are aware that there are certain risks or possible dangers in participating in these activities. I have entered into this agreement of my own free will.

Signature of Parent/Guardian

Date

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Discipline and Behavior Management Policy

Praise and positive reinforcement are effective methods of the behavior management of children. When children receive positive, non-violent, and understanding interactions from adults and others, they develop good self concepts, problem solving abilities, and self-discipline. Based on this belief of how children learn and develop values, this facility will practice the following discipline and behavior management policy.

We DO:

We DO NOT:

Praise, reward, and encourage the children	Shake, bite, pinch, push, pull, or slap the children
Reason with the set limits for the children	Make fun of , yell at, threaten, make sarcastic remarks about, use profanity, or otherwise verbally abuse the children
Modify the classroom environment to attempt to prevent problems before they occur	Shame or punish the children when bathroom accidents occur
Listen to children	Deny food or rest as punishment
Provide alternatives for inappropriate behavior to the children	Relate discipline to eating, resting or sleeping
Provide children with natural and logical consequences of their behaviors	Leave the children alone, unattended, or without supervision
Treat the children as people and respect their needs, desires and feelings	Place children in locked rooms, closets, or boxes as punishment
Ignore minor misbehaviors	Allow discipline of children by children
Explain things to children on their levels	Criticize, make fun of, or otherwise belittle children’s parents, families or ethnic groups
Use short supervised periods of “time-out”	
Stay consistent in our behavior management program	

I, the undersigned parent or guardian of _____ do hereby state that I have read and received a copy of the facility’s Discipline and Behavior Management Policy and that the facility’s Director/Administrator has discussed the facility’s Discipline and Behavior Management Policy with me.

Enrollment Date: _____

Signature of Parent/Guardian

Date

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DISCIPLINE PROCEDURES

Character Behavior

Redirecting Negative Behavior & Modeling:

1. Model for the child(ren) the correct behavior practice within the classroom setting.
2. Review daily classroom rules & regulations with examples for the classroom behavior at circle time.
3. Role-play character education and best practices within the center in the classroom setting.
4. Each classroom will use their behavior chart with consequences for unacceptable behavior.

Verbal Disrespect

Verbal Disrespect: The use of defiant or profane words towards another person(i.e. friends, teachers, parents or Director)

1. The first time – child will go to “time out”
2. The second time – child’s parents will be notified by phone, letter or verbally upon pick-up
3. If this behavior continues, the child will receive a day’s suspension at the discretion of the Director.

Physical Endangerment and/or Abuse Practices

1. If a child physically hurts or endangers his/her friends, teachers or Directors intentionally, he/she will be placed in the office. The parent will be made aware of the incident by phone and if deemed necessary suspended from the Center.

Signature of Parent/Guardian

Date

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Corporal Punishment Policy

When positive efforts have not succeeded in correcting a student whose behavior interferes with the ability of him/her self and others to learn, the following corrective measures are authorized:

1. Corporal punishment in accordance with regulations established by the Elders of the Nations Ford Community Church;
2. Suspension in accordance with regulations established by the Elders of the Nations Ford Community Church
3. Exclusion in accordance with regulations established by the Elders of the Nations Ford Community Church

As part of a progressive discipline plan, corporal punishment is permissible at Nations Ford Christian Academy.

Corporal punishment may only be administered by the Director of the Christian Academy (*and under no circumstances will a teacher be permitted to administer corporal punishment*) in the presence of the child’s parent. Corporal punishment shall not be used as the disciplinary action on a first offense, shall not be used as a choice in lieu of other disciplinary action, as outlined on pages 7-8 and shall only be used after other corrective measures have been exhausted.

If a parent is unable to be present during the administering of corporal punishment, the parent must speak with the child over the telephone and remain on the telephone while corporal punishment is being administered to their child.

If parent(s) or guardian(s) object to the use of corporal punishment with their children, such objection must be made upon enrollment in writing, to the Director of the school. A student whose parent or guardian objects, in writing, to the use of corporal punishment, when and if it is deemed necessary by the Director, the child may be suspended.

A record of each case where corporal punishment is administered shall be maintained in the student’s file along with a copy in the Director’s office.

Signature of Parent/Guardian

Date

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After-School Program Payment Information Sheet

Hours of Operation

School Dismissal until 6:00pm Monday through Friday

Program Cost

\$50.00 non-refundable registration fee

\$50.00 weekly fee per child

\$25.00 per child for Teacher Workdays and Most Holidays

After-School Payment Policy

The entire registration fee and first week tuition listed above must be submitted along with the application form. This will ensure space for your child in the program.

The weekly tuition must be paid in advance of the week that your child will be attending after-school. All fees are due by Friday at 6:00pm for the upcoming week. After 6:00pm on Monday, there is a \$7.00 late fee added for each additional day that tuition goes unpaid.

If your account becomes delinquent for 1 week or more, after-school services will be suspended until full payment is received, no exceptions.

Checks and money orders are the only acceptable forms of payment. Please make checks payable to Nations Ford After-School Enrichment Program, reference your child’s name and After-School Program on the memo line. Payments are to be made in the Parents Resource Room of the Nations Ford Christian Academy.

Credit or debit card payments are only acceptable on-line at www.nfcckids.org. All registration fees, activity fees and tuition payments are non-refundable.

A fee of \$35 will be charged for all returned checks. Any account with two (2) returned checks will be required to make ALL future payments with a money order or cashiers check.

Sign In/Out Procedure

All children must be signed out by the parent or authorized guardian each day upon departure. This is the responsibility of the parent and assists in the safety and accountability of your child. Children should never enter or exit the building without adult supervision.

Signature of Parent/Guardian

Date



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FINANCIAL AGREEMENT

Upon enrolling my child (ren) _____, in the Nations Ford After-School Enrichment Program, I agree to pay the **non-refundable** registration fee of \$_____.00 and the first week's tuition fee of \$_____.00.

After enrollment, I agree to pay the weekly tuition fee of \$_____.00 in advance on Friday of each week for the upcoming week.

If I arrive to pick up my child later than my paid service time, I agree to pay the penalty of \$1.00 per minute after 6:00pm. I understand that this charge is to be paid upon arrival to pick up my child.

I agree to give two (2) weeks notice, in writing, before removing my child from the Center. If I do withdraw the child for any reason other than illness or proven cases of neglect/abuse, I will pay the forthcoming weeks.

I understand that my child will no longer be allowed to attend Nations Ford After-School Enrichment Program if the account is delinquent over one (1) week. This, however, will not cancel my responsibility to cover the costs of these two weeks.

I understand that, if my check is dishonored or returned for any reason, Nations Ford After-School Enrichment Program will electronically charge my account for the amount, plus a processing fee of \$35.00.

I further understand that, if the fees are not paid, Nations Ford After-School Enrichment Program has the right to refer my account to the proper authorities for collection.

Father/Guardian's Signature

Date

Mother/Guardian's Signature

Date

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2011-2012 After-School Enrichment Program
School Closing Calendar

Dates	Events or Closing
September 5, 2011	Labor Day
November 23 - 25, 2011	Thanksgiving Holiday
December 23, 2011 – December 26, 2011	Christmas Break
December 30, 2011 – January 2, 2012	New Year’s Break
January 16, 2012	Martin Luther King Jr. Holiday
April 6, 2012 – April 9, 2012	Good Friday and Easter Monday
May 28, 2012	Memorial Day