



## Rose Child Care, LLC - Admission Checklist



I/We, the Guardian(s) of \_\_\_\_\_, have completed the following steps necessary to enrolling our child in Rose Child Care, LLC.

1. \_\_\_\_ Application for admission in this packet has been completed and returned with the non-refundable admission fee of \$100 applied for admission.
2. \_\_\_\_ I/We have received and reviewed the Rose Child Care, LLC handbook or looked it up at [rosechildcarellc.com](http://rosechildcarellc.com) .
3. \_\_\_\_ The medical information form in this packet from Rose Child Care, LLC has been completed and signed by the guardian(s).
4. \_\_\_\_ An up-to-date immunization form and medical exam form will be obtained from the pediatrician according to the state of Florida and the Leon County Health Department, before the end of 1 month of care. (The doctor will know this as the blue and gold forms.)
5. \_\_\_\_ The annual materials fee of \$120 for expendable supplies will be paid by the first day of service and every year after.
6. \_\_\_\_ First month's tuition according to classroom placement will be applied for admission on the first day of service.
7. \_\_\_\_ Tuition and Registration Agreement, Rate Sheet and Discipline Policy in this packet have all been signed.
8. \_\_\_\_ If needed my child has shadowed at Rose Child Care, LLC.
9. \_\_\_\_ I/We, the Guardian(s), have met or interviewed with Rose Child Care, LLC management.
10. \_\_\_\_ I/We, the Guardian(s), understand smoking is prohibited on the child care grounds.

\_\_\_\_\_  
Signature of Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Guardian

\_\_\_\_\_  
Date



**Rose Child Care, LLC**  
Application for Admission

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Childs full name

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Enrollment Date

Age at Enrollment

Date of Birth

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Guardian 1

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Guardian 2

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(street)

---

(city, state, zip)

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Guardian 1 address

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Guardian 2 address

---

Guardian 1 SSN

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Guardian 2 SSN

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Guardian 1 phone

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Guardian 2 phone

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Guardian 1 phone

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Guardian 2 phone

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Guardian 1 phone

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Guardian 2 phone

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Guardian 1 email

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Guardian 2 email

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Emergency contact name

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Emergency contact number

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Emergency contact name

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Emergency contact number

## Rose Child Care, LLC Pick Up Permission Form

The following persons are given permission to pick up my child from Rose Child Care, LLC:

Name and relation to the child	Phone number
Name and relation to the child	Phone number
Name and relation to the child	Phone number
Name and relation to the child	Phone number
Name and relation to the child	Phone number

*\*Reminder: Adults 18 years old and over and on this list are allowed to pick up a child from Rose Child Care, LLC and must show his/her identification card at pick up. Should a special situation arise the parent/guardian must sign a letter allowing someone who is not on this list to pick up his/her child.*

I/We, the parents of \_\_\_\_\_, allow the above listed individuals to remove my/our child from the care of Rose Child Care, LLC and the care of the Rose Child Care, LLC staff on any given day that Rose Child Care, LLC is open for business without forewarning except for this authorization form allowed by the signature(s) below. I/We also understand that proper identification will be mandatory at the time of pick up and my/our child will remain in the care of Rose Child Care, LLC and the Rose Child Care, LLC staff until proper identification is presented by the authorized individual.

Signature of Guardian	Date
Signature of Guardian	Date

# Rose Child Care, LLC

## Medical Information

Please let us know if your child has any health concerns or needs that need to be met during the school day. This information is to help us ensure your child receives the best pre-school experience possible in an environment that is safe for him/her.

\_\_\_\_\_  
Child's name

\_\_\_\_\_  
Date of birth

\_\_\_\_\_  
Allergies

\_\_\_\_\_  
Medication taken

\_\_\_\_\_  
Special instruction

\_\_\_\_\_  
Dosage and time(s) given

\_\_\_\_\_  
Child's physician

\_\_\_\_\_  
Physician phone number

\_\_\_\_\_  
Preferred Family hospital

\_\_\_\_\_  
Hospital phone number

Classroom activities are carefully planned out and individual children are considered. Please list itmes that your child is not allowed to eat for reference when planning cooking activities:

\_\_\_\_\_  
Unallowable food item

\_\_\_\_\_  
Unallowable food item

\_\_\_\_\_  
Unallowable food item

\_\_\_\_\_  
Unallowable food item

\_\_\_\_\_  
Unallowable food item

\_\_\_\_\_  
Unallowable food item

\_\_\_\_\_  
Unallowable food item

\_\_\_\_\_  
Unallowable food item

I/We, the parents of \_\_\_\_\_, understand that the information given above is current and accurate. If any of the above information changes, it is my responsibility to notify the Operator at Rose Child Care, LLC.

\_\_\_\_\_  
Signature of Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Guardian

\_\_\_\_\_  
Date



**Rose Child Care, LLC**  
Rate Sheet

Please circle the rate that applies:

Hours	Full Time <small>7am-6pm, m-f</small>	Part Time <small>Pre-set Monthly Fee</small>
Larvae Program 0 months-11 months	\$825 a mth	\$4.5 an hr
Caterpillar Program 12 months-23 months	\$750 a mth	\$4.5 an hr
Chrysalis Program 24 months-35 months	\$725 a mth	\$4.5 an hr
Butterfly Program 36 months and Up	\$700 a mth	\$4.5 an hr
VPK Wrap around fee (9mth school yr before Kindergarten)	\$450 a mth	\$4.5 an hr

If you pay by the hour please fill out this chart:

Child's Name \_\_\_\_\_

	Monday	Tuesday	Wednesday	Thursday	Friday
In time					
Out time					

\_\_\_\_\_  
Signature of Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Guardian

\_\_\_\_\_  
Date

# Rose Child Care, LLC

## Tuition and Registration

1. I/we understand that an application for admission must be completed and returned with the non-refundable admission fee of \$100.00
2. I/we understand that this agreement reserving a space for my child is signed upon acceptance into the program and that the first month's tuition and the annual materials fee will be collected at the first day of service.
3. I/we understand that a annual materials fee of \$120, will be charged each year my child is enrolled and will be used for materials and expendable supplies. This does not include food or diapers but does include wipes and a sleeping mat.
4. I/we understand that a immunization from and medical examination form must be filled in by my child's physician and submitted to Rose Child Care, LLC before my child reaches the end of their first month of care.
5. I/we understand that the medical information sheet for Rose Child Care, LLC must be completed and signed by the Guardian.
6. I/we understand that tuition is due in advance by the 25<sup>th</sup> of the previous month. For example, August tuition is due by July 25<sup>th</sup>. Tuition is late if it is received after the first of the month that the tuition is charged. A late fee of \$25.00 will be due after the first. Tuition is billed at a flat, monthly rate regardless of number of days the center is open in a particular month, student illness, or vacation. Billing is based on 20 days. Adjustments are not made as we, at Rose, need constant fee structure to offer quality staff and a first rate environment.
7. I/we understand that each family is expected to sign a tuition agreement with Rose Child Care, LLC. Care is provided for a specific number of children. In order to maintain a child's program space, an agreement must be signed and also, paid for each month, regardless of vacations and illnesses. Families are expected to financially fulfill their space agreement for the duration of the child's enrollment with Rose Child Care, LLC.
8. I/we understand that if I should decide to withdraw my child from Rose Child Care, LLC, a 30-day notice is required and that guardians are responsible for full tuition for 30 days after the withdraw notice is given.
9. I/we understand that Rose Child Care, LLC has and reserves the right to send account information to collections 30 days after notification of a past due balance.

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Signature of Guardian

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Date

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Signature of Guardian

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Date

# Rose Child Care, LLC

## Discipline Policy

The environment of Rose Child Care, LLC is structured to enable children to make choices concerning activities and materials. This ability to choose and plan gives the child power and prevents many conflicts during the school day.

Children are encouraged to develop language skills that help them to communicate their needs and wants. Language skills are continuously targeted and developed as children are encouraged to use language as a problem-solving tool.

If a child is experiencing difficulty using language to solve problems in one area of play, he/she is offered another play activity. In the event that the child is still unable to make appropriate choices, using language to have his/her needs met, he/she is removed from the problem area and given a personal space away from the others. Time limits are imposed by the child. He/she may return to the group or activity when he/she is ready to make a choice and use language appropriately to deal with conflicts.

Guidelines for behavior are clearly explained to the children. Appropriate conflict resolution methods are modeled and continuously encouraged by teachers in order to allow the children opportunities for decision making and self-direction. Rose Child Care, LLC strives to provide an environment that allows children and adults alike to function to their fullest potential in solitary and group activities. The goal of the program is to develop oral communication skills which help build an internal control system, enabling individuals to grow and function in society. Should a child continue aggressive behavior after parent conferences, we encourage the family to look for a setting that would further help the child with his/her needs.

**Corporal punishment is never appropriate and never used.**

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Signature of Guardian

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Date

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Signature of Guardian

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Date