

**Select Payment Choice:**  
 Monthly  
 Semi-monthly (3% Service Charge)  
 Weekly (3% Service Charge)

**APPLICATION FORM FOR ENROLLMENT**  
(Please print. Thank you.)

Registration Fee: \$100.00	Date _____	Cash _____	Check# _____	CC _____
Class Fee: \$30.00	Date _____	Cash _____	Check# _____	CC _____
Registration Packet:	Date _____	In house _____	Mailed _____	

**Child's Name** \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_  
Last First M.I.

Child's Address \_\_\_\_\_ Phone \_\_\_\_\_  
P.O. Box or Street  
City State Zip Code

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Primary Language \_\_\_\_\_ T-shirt size (please circle): XS S M L

This child lives with: (circle one) Mother & Father Foster Parents  
Mother Only Grandparents Father Only Other: \_\_\_\_\_

**Father's Name** \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
Work Phone (\_\_\_\_) \_\_\_\_\_

Address (if different from child's) \_\_\_\_\_

Father's Place of Employment \_\_\_\_\_

Address of Employment \_\_\_\_\_

Position \_\_\_\_\_ Soc. Sec. or CDL # \_\_\_\_\_

**Mother's Name** \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
Work Phone (\_\_\_\_) \_\_\_\_\_

Address (if different from child's) \_\_\_\_\_

Mother's Place of Employment \_\_\_\_\_

Address of Employment \_\_\_\_\_

Position \_\_\_\_\_ Soc. Sec. or CDL# \_\_\_\_\_

**Check your schedule choice indicating preferred days:**

- 5 days a week       3 days a week \_\_\_\_\_
- 2 days a week \_\_\_\_\_
- 6:00 am to 6:30 pm     8:00 am to 5:00 pm     7:30 am to 4:30 pm     7:00 am to 4:00 pm
- 6:00 am to 1:00 pm     6:00 am to 12:00 pm

**List all persons living in the household with this child.**

Name	Age	Relationship to Child	Employed (Yes/No)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Preschool last attended** \_\_\_\_\_ **Teacher** \_\_\_\_\_

**Street Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_

**How did you learn about our center?** \_\_\_\_\_

State briefly why you want your child to attend CPCC Preschool \_\_\_\_\_

**Church you regularly attend?** \_\_\_\_\_

**I hereby make application for the admission of my son/daughter to CrossPoint Children’s Center. If my child is accepted into CPCC Preschool, I agree to pay my financial obligations and adhere to the policies of the school. I understand that registration fees are non-refundable and non-transferable. I understand there is a two-week notice when withdrawing or changing my child’s schedule.**

**Parent’s Signatures** (both parents must sign if child lives with both parents):

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

CrossPoint Children’s Center is a ministry of CrossPoint Church. The school has a non-discrimination policy. CrossPoint Children’s Center shall make no distinction in its admission or educational services on the grounds of race or ethnic origin.

# Enrollment Application

## CrossPoint Policy Information Summary

Please Read, Sign and Return with your Enrollment Application

The information presented in this form is a summary of the policies outlined in the Parent Handbook. This form is presented at the time of application to help parents understand CPCC policies.

### **I. CrossPoint Children's Center is a Year Round School**

- Our School Year is from the end of August through the middle of August each year.

### **II. Annual Registration**

- Parents must register their child for enrollment for each new school year.
- Because CPCC is a year round school, if your child is currently attending CrossPoint and you wish to re-register him/her for the following school year, you must keep your child enrolled during the summer session to insure that a space will be available for that coming September. Please take this into consideration when registering your child for the new school year and as you pay your non-refundable registration fee for the Fall.

### **III. Withdrawal Procedures**

- If you wish to withdraw your child from CrossPoint a written notice must be turned in to the school office at least two weeks prior to your child's withdrawal. Verbal notifications will not be accepted as official notification. You may pick up a "Notification of Withdrawal" notice from the front desk.

### **IV. Vacation and Illness**

- Parents are required to pay tuition fees for each week their child is enrolled in the center whether or not the child is in attendance.

### **V. Tuition Payments**

- Initial tuition fees are prorated and are due the first day of your child's attendance.
- Monthly tuition payments are due the first working day of each month. *A late fee of \$20.00 will be charged to your balance if tuition is not received by 6:30 pm on the 5<sup>th</sup> day of the month.*

**(Over)**

- Tuition is prorated on an average annual basis to ensure the continued quality operation of the center. Therefore, no tuition credit is given for any of the days when the center is closed or any days a child is absent due to vacation or illness. There are no provisions for leave of absence.

- September 2, 2008 CrossPoint Children’s Center began collecting tuition fees by Electronic Funds Transfer. Payments can be made by EFT from your checking or savings account or by recurring credit card charges.
- If you choose not to enroll in Tuition Express, our EFT provider, a \$5.00 monthly “handling fee” will be charged to your account as it will be necessary to continue processing your payments by hand.

**VI. Summer Session Reservations**

- Remember, CPCC is a year round school. There is no re-registration for the Summer Session, simply a reservation form for the various activities offered.
- Reminder! If your child does not attend Summer Session your space for Fall cannot be guaranteed.

**VII. Arrival and Departure**

- The Department of Social Services and CrossPoint Children’s Center require parents to check their child in and out each day on the “Touch Screen” system at the front desk. After checking your child in, it is the parent’s responsibility to be sure that the teacher acknowledges the child’s arrival and departure every day.

**VIII. Required Forms for First Day of Attendance**

- Included with all the forms in your Enrollment Packet, two forms that will need to be filled out by your child’s physician are:  
 (1) Physician’ Report for Child Care Centers including a TB test indicating the results (if needed), (2) Current Immunization Record indicating required immunizations with dates given.

When you receive your packet of forms required for your child’s file, you will also receive ***a Parent Contract which needs to be signed and returned with your child’s other forms.***

Thank you for looking into CrossPoint Children’s Center for the care and education of your child.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_

\_\_\_\_\_