



JLP INSPIRING MINDS

Contact@jlpInspiringMinds.com

7147 N Pine Island Road, Tamarac, FL, 33321

954-746-5437

Tuition Agreement

Today's Date: _____ Date to Start School: _____

Child's Name: _____ Date of Birth: _____

Parent's Name(s): _____

Address: _____

Telephone Number: _____ E-Mail: _____

There is an annual, non-refundable, non-transferable registration fees. \$200 for the Toddler, Two's, Three's, and 4 (VPK) Year Old Programs. All 4–5-year-old (VPK) programs will also require a \$50 technology fee.

Tuition payments will be due on Monday's!

There will be a \$25 late payment fee for any payments made after Monday.

Toddlers (12 Months- 24 Months) _____ Monday- Friday (6:30am-6:30pm) \$250 Per week (Parent Provides Diapers and Wipes)
Two's (24- 36 months) _____ Monday- Friday (6:30am-6:30pm) \$250 Per Week (Parents Provide Diapers and Wipes)
Three's (36- 48 Months) _____ Monday-Friday (6:30am-6:30pm) \$225 Per Week (If child is potty training, Parent will Provide Pull-ups and Wipes)
VPK (Four- and Five-Year Old') (48-60 Months) _____ Monday- Friday (9am-12pm) \$160 Per Week

****Program offerings are subject to change based on enrollment****

I agree to enroll my child in the program(s) checked above _____

(Parent Signature)

I agree to enroll my child in the program(s) checked above _____
(Parent Signature)



JLP Inspiring Minds School Registration has begun. At this time, you can register your child for JLP Inspiring Minds School for the School Year.

Hours of operation- 6:30am-6:30pm

The classroom size of **11** promotes a quality low-staff child ratio. Family members will receive weekly newsletters. In addition, the JLP Inspiring Minds families will be connected through a family-school App that will allow you to download pictures and videos and receive reports; all in one secure, convenient location.

JLP Inspiring Minds School staff continue to commit the schools to excellent health and safety procedures including safe drop off and pick up, stringent handwashing, and a strong partnership with their local health department.

To begin your enrollment process, you will receive a link to set up your account in the Procure online parent portal. Procure parent portal will be your one-stop shop for all your tuition needs.

The best part is you can set your billing with recurring payments, to make your billing hassle-free. The additional paperwork can be dropped off or emailed to the school.

We are available for any questions and help is always provided through this enrollment process and the procure experience.

Parent Signature: _____

Board of County Commissioners, Broward County, Florida
Child Care Licensing and Enforcement

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Section **CHILD ENROLLMENT**
INFORMATION

HUMAN SERVICES DEPARTMENT
Community Partnerships Division

PASSWORD: _____

Name of Child: _____ First Date of Attendance: _____ Sex: _____ Birth Date: _____

Preferred Name: _____ Address: _____

List of Known Allergies: _____

Special Needs: _____

Mother

Name: _____ E-mail: _____ Phone: _____

Home Address: _____

Place of Employment Name: _____ Phone: _____ Email: _____

Address: _____

Father

Name: _____ E-mail: _____ Phone: _____

Home Address: _____

Place of Employment Name: _____ Phone: _____ Email: _____

Address: _____

Guardian

Name: _____ E-mail: _____ Phone: _____

Home Address: _____

Place of Employment Name: _____ Phone: _____ Email: _____

Address: _____

Child's Physician

Name: _____ E-mail: _____ Phone: _____

Home Address: _____

May facility consult the above physician if parent/guardian cannot be reached? Yes No

Other persons to be notified in case of illness or accident

Name: _____ E-mail: _____ Phone: _____

Home Address: _____

Name: _____ E-mail: _____ Phone: _____

Home Address: _____

Name: _____ E-mail: _____ Phone: _____

Home Address: _____

Person(s) permitted to remove child: Mother Yes No Father Yes No

Name: _____ Relationship: _____ Phone: _____

Address: _____

Name: _____ Relationship: _____ Phone: _____

Address: _____

Name: _____ Relationship: _____ Phone: _____

Address: _____

Name of Person Enrolling Child (Print)

Signature of Person Enrolling Child

Date of Enrollment



Child's Profile

Date: _____

Child's Name: _____ Date of Birth: _____

Medical History

Type of Birth: ___ Normal ___ Premature ___ Complications

Please explain: _____

Please list any conditions, illnesses, allergies, or special needs that we should be aware of:

Please list any medications that your child takes on a regular basis:

Please list any special eating habits your child may have:

Developmental History

At what age did your child begin to walk? _____

How do you comfort your child? _____

What are your child's favorite activities? _____

What language(s) is spoken in your home? _____

Do you have any concerns regarding your child's speech or hearing? If yes, please explain:

Toilet Training

Can your child be relied upon to indicate his/her bathroom wishes? _____

What words does your child use? _____

Are there any concerns you have about your child's toileting? _____

Sleeping

Do you have any specific ways of helping your child go to sleep? _____

What is your child's current sleeping schedule? _____

Social Experiences

If there are other children living in your household, please complete the following:

Name _____ Age _____ Gender _____ Relationship to the Child _____

Name _____ Age _____ Gender _____ Relationship to the Child _____

Name _____ Age _____ Gender _____ Relationship to the Child _____

Please list the names of the adults living in your household

Name _____ Relationship to the Child _____

What past experiences has your child had playing with other children?

I **do not** need to meet with an Administrator to further discuss my child's specific needs.

I **do** need to meet with an Administrator to further discuss my child's specific needs.

Please list any other information, medically or socially about your child that we should know.

Parent/Legal Guardian Signature

Print Name



Discipline Policy

JLP Inspiring Minds believes children and families deserve to be full members of their communities and to experience a sense of belonging. Children also deserve access to high-quality learning and development opportunities. JLP Inspiring Minds is an integral part of these fundamental experiences. We know that suspensions and expulsions from early childhood programs can have a significant negative impact on children and families. We take suspension and expulsion decisions seriously, consider the impacts carefully, and keep children enrolled whenever possible. We work closely with families to set children on positive paths. When we talk to families about issues as they arise, we can often avoid suspension and expulsion. To prevent suspension and expulsion we:

- Create learning environments in which every child feels good about being there. • Design a learning environment that promotes children's engagement.
- Focus on teaching children what to do-specifically, by teaching expectations and routines as well as skills children can use in place of challenging behaviors.

Corporal punishment will not be used under ANY circumstances. Our discipline policy is intended to promote children's social and emotional skills, thereby preventing concerning behaviors. Suspension and expulsion are a last resort, used only when other steps taken to resolve an issue have been unsuccessful. Even after the difficult decision to end care has been made, we will do our best to help make the transition as smooth as possible for the child and family. We do this by:

- Giving families reasonable notice, generally at least one week, prior to ending care, unless it is necessary to immediately discontinue services.
- Help families find alternate care by connecting them with community based child care resources and referral agencies.

Expulsion/Dismissal Policy

We will make reasonable efforts to prevent expulsion/dismissal of children in our care. However JLP Inspiring Minds reserves the right to cancel enrollment for the following reasons;

- Non-payment of tuition
- Failure to adhere to policies
- The child's needs exceeds the capabilities of our center
- Child's behavior endangers the safety and well-being of other children and/or staff. - Parent/Guardian behavior and/or actions threaten other children, parents or staff.

Withdrawing your Child

If you need to withdraw your child, we require two weeks written notice prior to your leaving. If your child is in attendance on the 1st day of a month during the school year, tuition is due in full for that scheduled payment.

Parent Refunds

Any overpayment of fees at time of withdrawal will be refunded in the same manner as the payment was made i.e.; check or credit card whenever possible. The refund should be received within 30 days of approval.

Child's Name: _____

Parent Name: _____ Date: _____

Parent Signature: _____

A change in daily routine, lack of sleep, stress, fatigue, cell phone use, and simple distractions are some things parents experience and can be contributing factors as to why children have been left unknowingly in vehicles.

It only takes a car 10 minutes to heat up 20 degrees and become deadly. Even with a window cracked, the temperature inside a vehicle can cause heatstroke. The body temperature of a child increases 3 to 5 times faster than an adult's body.



Developed by:
The Office of Child Care Regulation

- Never leave your child alone in a car and call 911 if you see any child locked in a car!
- Make a habit of checking the front and back seat of the car before you walk away.
- Be especially mindful during hectic or busy times, schedule or route changes, and periods of emotional stress or chaos.
- Create reminders by putting something in the back seat that you will need at work, school or home such as a briefcase, purse, cell phone or your left shoe.
- Keep a stuffed animal in the baby's car seat and place it on the front seat as a reminder when the baby is in the back seat.
- Set a calendar reminder on your electronic device to make sure you dropped your child off at child care.
- Make it a routine to always notify your child's child care provider in advance if your child is going to be late or absent; ask them to contact you if your child hasn't arrived as scheduled.

During the 2018 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes to provide parents, during the months of April and September each year, with information regarding the potential for distracted adults to fail to drop off a child at the facility/home and instead leave them in the adult's vehicle upon arrival at the adult's destination.

My signature below verifies receipt of the Distracted Adult brochure

Parent/Guardian: _____

Child's Name: _____

Date: _____

Please complete and return this portion of the brochure to your child care provider, to maintain the receipt in their records.



Family Insurance Information

Child's Name: _____ Date of Birth: _____

Home Phone Number: (_____)_____

Primary Parent/Guardian's Name: _____

Cell Phone #:(_____)_____ Work Phone #:(_____)_____

Parent/Guardian's Name: _____

Cell Phone #:(_____)_____ Work Phone #:(_____)_____

I/We, the undersigned, have registered my/our child

_____ to attend JLP Inspiring Minds
Schools. (Name of child)

___My child will be covered by a Supplemental Student Accident Program ("SAP") to reimburse out-of-pocket expenses not otherwise covered by my medical, dental, or accident insurance. Questions should be directed to the JLP Inspiring Minds Schools Student Accident Administrator at 1-800-352-4466, prompt 2.

___I've/We've attached a photocopy of my family insurance identification card. This policy will cover my/our child in the event of expenses being incurred while participating in any school activities. I/We understand that I/we are responsible for any and all expenses not reimbursed by the JLP Inspiring Minds SAP for emergency and medical care of my/our child.

I/We are also aware of day to day risks involved in school activities and will not hold JLP Inspiring Minds Schools or employees of JLP Inspiring Minds Schools responsible for any injuries that may be sustained during participation of activities at JLP Inspiring Minds Schools. I/We have read, signed and understand the Policy and Payment Agreement.

Date Signature of Primary Parent/Guardian Print Name

Date Signature of Other Parent/Guardian Print Name

During the 2009 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes provide parents with information detailing the causes, symptoms, and transmission of the influenza virus (the flu) every year during August and September.

My signature below verifies receipt of the brochure on Influenza Virus, The Flu, A Guide to Parents:

Name: _____ Child's Name:
_____ Date Received: _____
Signature: _____

Please complete and return this portion of the brochure to your child care provider, in order for them to maintain it in their records.

What should I do if my child gets sick?

Consult your doctor and make sure your child gets plenty of rest and drinks a lot of fluids. Never give aspirin or medicine that has aspirin in it to children or teenagers who may have the flu.



*****Health Form Reminder *****

Attendance will not be allowed at any JLP Inspiring Minds Schools Without The Following Up To Date Health Forms

**ORIGINALS REQUIRED FOR JLP Inspiring Minds SCHOOLS PRESCHOOL
STUDENTS COPIES ACCEPTED FOR ELEMENTARY STUDENTS**

VACCINATION RECORD (FORM DH-680)

**THIS FORM MUST NOT BE EXPIRED
AND MUST INCLUDE ALL REQUIRED SHOTS FOR CHILD'S
AGE AND MUST INCLUDE HEPATITIS B SHOTS,
PNEUMOCONJU SHOTS
AND VARICELLA OR VARIVAX VACCINE (CHICKEN POX)
OR DATE OF CHICKEN POX DISEASE**

**Children over the age of 15 months
must have the measles vaccine.**

AND

GOOD HEALTH CERTIFICATE (FORM DH 3040)

**THIS FORM IS VALID FOR 2 YEARS FROM THE DATE OF
THE LAST PHYSICAL.**

**THESE FORMS ARE AVAILABLE FROM
A FLORIDA PEDIATRICIAN or www.flshots.com
OUT OF STATE OR COUNTRY FORMS ARE NOT ACCEPTED.**

**NO CREDITS WILL BE GIVEN TO YOUR ACCOUNT FOR
MISSED DAYS IF YOUR FORMS HAVE NOT BEEN SUBMITTED
TO OUR SCHOOL OR HAVE EXPIRED.**

Parent's Role

A parent's role in quality child care is vital:

- Inquire about the qualifications and experience of child care staff, as well as staff turnover.
- Know the facility's policies and procedures.
- Communicate directly with caregivers.
- Visit and observe the facility.
- Participate in special activities, meetings, and conferences.
- Talk to your child about their daily experiences in child care.
- Arrange alternate care for their child when they are sick.
- Familiarize yourself with the child care standards used to license the child care facility.

This child care facility is licensed according to the minimum licensure standards included in section 402.305, Florida Statutes (F.S.), and Chapter 65C-22, Florida Administrative Code (F.A.C.).

License Number: 46436

License Issued on 7/1/2019

License Expires on 6/30/2020

For more information regarding

the compliance history of this child care provider, please visit:

MyFLFamilies.com/childcare

**Office of Child Care Regulation
and Background Screening**

Office of Child Care Regulation and Background Screening

To report suspected or actual cases of child abuse or neglect, please call the Florida Abuse Hotline at 1-800-962-2873.

CF/PI 175-24, 03/2014

This brochure was created by the

Florida Department of Children and Families, Office of Child Care Regulation and Background Screening pursuant to s. 402.3125(5), F.S.,

Special Snack/Cooking Activity

Permission Slip

Dear Parents,

At JLP Inspiring Minds Schools as a part of our curriculum and learning activities we have a planned cooking activity/special snack planned each week. If the classrooms are eating/preparing something other than what is listed on our snack menu there will be a Home School Connection notice posted for your child's classroom. This is an opportunity for families to contribute an ingredient for the activity and/or to let the teachers know that your child can NOT have something that is listed. The snacks are varied throughout the school year depending on the curriculum. Here is a list of some of the common ingredients that are used. The younger children will not be served the same as older children due to different abilities. This is not a complete list, so it is important that you look at the Home/School Connection that is listed each week to ensure that your child can participate.

Common ingredients: celery, carrots, broccoli slaw, apples, bananas, strawberries, grapes, cream cheese, hummus, raisins, crackers, rice cakes, tortilla chips, cheddar cheese, tomatoes, butter, ice cream, yogurt, blueberries, raspberries, peas, salsa, ketchup, granola, eggs, milk, etc.

In addition there will be some special events during the school year where other food may be served.

I give my child, _____, permission to participate in Special Snack/Cooking Activities and Special Events where food might be served at JLP Inspiring Minds Schools

My child has the following allergies/dietary preferences so they

may NOT have the following: _____

Parent's Signature _____ Date _____

Acknowledgement of Receipt

After you have read this handbook, please complete an acknowledgement and return it to your Director on or before Sept. 1st.

I have read and fully understand the guidelines and procedures set forth in the Family Handbook. I have a copy of this handbook for my personal reference.

ENROLLING PARENT OR GUARDIAN FULL NAME (PLEASE PRINT) _____

CHILD NAME(S) _____

- I have received a tour of one of the JLP Inspiring Minds School.
- After enrolling my child, I received monthly calendars, curriculum information and other available resources needed.
- I was able to spend time with the Director to discuss my child and my family's unique needs.
- If it was needed, there were accommodations made for English as a second language.
- I was introduced to teaching staff before the 1st day of school.
- I have received and read the JLP Inspiring Minds Schools family handbook.
- I attended Meet and Greet with the goal of getting to know the teacher and the classroom.
- If I enrolled after August, I was invited to spend time in the classroom with my child to begin a healthy separation for both of us.

PARENT/GUARDIAN SIGNATURE _____ DATE _____