



Dear Parents,

Welcome to the Creative Learning Center! We are excited about the 2012-2013 school year and hope that you are too! We have new program offerings and a few changes to simplify the registration process that I would like to share with you:

- Parents with multiple children attending the CLC will enjoy a registration discount. The first child's registration fee will be \$75, but the remaining siblings will register for \$40.
- In order to cause less confusion during the registration process, the Activity/Supply fee is equal to one month of tuition.
- We have renamed our Mother's Day Out program (Toddlers and Twos) as our Early Learning School. We want to convey that not only are we offering a nurturing home away from home for our youngest children, but we are providing enriching and stimulating activities to give our children a strong foundation - socially, emotionally, physically, spiritually, and intellectually.
- We have increased our offerings in the Toddler and Two classes to include an option on Fridays that dismisses at noon.
- The pilot programs were successful, so we will continue to offer a 3 year old class 3 days a week (PS3) and a 4 year old class 4 days a week (PK4).
- We have listened to our parents who have asked for more Extended Day options. If your child attends a PS3 or a PK4 class, Extended Day will be offered each day that your child attends CLC.
- The CLC Parent Handbook is available for you to review online in an effort to cut down on our use of paper.
- Registration packets and other important registration information are now available online at [www.clcgrapevine.org](http://www.clcgrapevine.org). Be sure to tell your friends!

The Creative Learning Center has a strong history of providing "Quality Care in a Christian Environment." Our dedicated staff continues to create a warm and loving environment while teaching the children the necessary skills for success. We are blessed with precious children and wonderful families. We look forward to sharing the next milestone in your child's life with you. Thank you for sharing your children with us!

Sincerely,

Sarah Oliver, Director



422 Church Street ▪ Grapevine, Texas 76051 ▪ 817-481-2559

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Dear Parents,

Welcome to First United Methodist Church of Grapevine! Children are important to us and I hope the *Creative Learning Center* can be of help to you and your children. The *Creative Learning Center* has been part of the church's outreach to children and their parents for decades and has blessed the lives of thousands in our community and beyond.

As you take the opportunity to look at our *Creative Learning Center*, please know that you are invited to our church on Sunday mornings. Each Sunday we have classes for children, youth and adults at our two campuses. Our downtown campus offers classes at 10:05 a.m. with services at 8:50, 9:00, 10:10 and 11:15 a.m. Our Heritage campus offers classes at 9:30 a.m. with a service at 10:30 a.m. We have an excellent nursery throughout the morning at both campuses. If you would like more information about our church please call 817-481-2559 or visit our website at [www.firstmethodistgrapevine.org](http://www.firstmethodistgrapevine.org).

Grace and peace,

John Mollet  
Senior Pastor



## 2012-2013 Registration and Tuition

### Registration Schedule:

- Current students and siblings = February 6
- FUMCG Church members = February 26
- New families = March 5

There is a non-refundable annual registration fee of \$75.

Families registering multiple children pay a \$75 registration fee for the first child and \$40 for each additional sibling.

The annual Activity/Supply fee is equal to one month's tuition and does not take the place of the first month's tuition.

The Activity/Supply fee is non-refundable after June 1, with the exception of TK on the following schedule: June 15 = 50% refund; July 15 = no refund.

Tuition is an annual rate that may be may be paid monthly, biannually or annually. Tuition is due on the 1<sup>st</sup> day of each month, September through May.



Children must reach the stated age by **September 1, 2012** to enroll in each program.

Program	Age Group	Hours	# of Days	Days Available	Activity/Supply Fee & Monthly Tuition Fee	Annual Tuition
Early Learning School	18 Months Old	9:00-12:00	1	F	\$100	\$900
	18 Months Old	9:00-2:30	1	T, W, or Th	\$140	\$1260
	2 Years Old	9:00-12:00	1	F	\$100	\$900
	2 Years Old	9:00-2:30	1	T, W, Th or F	\$140	\$1260
Day School Pre-School	3 Years Old	9:00-12:00	2	T, Th (PS2)	\$165	\$1485
			3	T, W, Th (PS3)	\$250	\$2250
	Extended Day Program	12:00-2:30	1, 2, or 3	T, W, or Th	Add \$50/month for each day	
Pre-Kindergarten	4 Years Old	9:00-12:00	3	M, W, F (PK3)	\$210	\$1890
			4	T, W, Th, F (PK4)	\$280	\$2520
	Extended Day Program	12:00-2:30	1, 2, 3 or 4	T, W, Th or F	Add \$50/month for each day	
Transitional Kindergarten	5 Years Old	9:00-12:15 9:00-2:30	5	M, F T, W, Th	\$460	\$4140



Child's Last Name	Child's First Name	Likes To Be Called
Date of Birth	Age as of September 1 <sup>st</sup>	___ Male ___ Female
Street Address	City	Zip

**Please mark 1<sup>st</sup> and 2<sup>nd</sup> choice for enrollment:**

Second days for Toddlers and Twos will be given only if there are no students on the waiting list for a first day.

**Toddlers:** \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday (noon dismissal)  
 Would you like a 2<sup>nd</sup> day if it is available? \_\_\_ yes \_\_\_ no

**Twos:** \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday \_\_\_ Friday (noon dismissal)  
 Would you like a 2<sup>nd</sup> day if it is available? \_\_\_ yes \_\_\_ no

**Pre-School (3 Year Olds):** \_\_\_ T/Th (PS2) \_\_\_ T/W/Th (PS3)

*Please mark 1<sup>st</sup> and 2<sup>nd</sup> choice:*

Extended Session (PS2): \_\_\_ Tuesday \_\_\_ Thursday  
 How many days would you like? \_\_\_\_\_

*Please mark 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choice:*

Extended Session (PS3): \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday  
 How many days would you like? \_\_\_\_\_

**Pre-Kindergarten (4 Year Olds):** \_\_\_ M/W/F (PK3) \_\_\_ T/W/Th/F (PK4)

*Please mark 1<sup>st</sup> and 2<sup>nd</sup> choice:*

Extended Session (PK3): \_\_\_ Wednesday \_\_\_ Friday  
 How many days would you like? \_\_\_\_\_

*Please mark 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> choice:*

Extended Session (PK4): \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday  
 How many days would you like? \_\_\_\_\_

**Transitional Kindergarten (5 Year Olds):** \_\_\_ M-F (TK)



Does child live with both parents? \_\_\_\_ Yes \_\_\_\_ No If not, with whom? \_\_\_\_\_

Mother's Name	Email Address	
Phone Number ____cell ____ home	Phone Number ____cell ____ home	Occupation
Father's Name	Email Address	
Phone Number ____cell ____ home	Phone Number ____cell ____ home	Occupation

Sibling(s)	Age	School

Emergency Contact(s)	Relationship	Phone Number(s)

I authorize that my child may leave the CLC only with the following individual(s), other than those named above:

NAME	PHONE NUMBER	NAME	PHONE NUMBER
1.		3.	
2.		4.	

List any SPECIAL NEEDS or FEARS so that we may better help your child.

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Does your child have any of the following conditions that the CLC staff should be aware of in order to provide the best care for your child? (Your answers are for informational use only and are not used to determine entrance into the CLC program.)

	Yes	No
Allergies		
Chronic Illness		
Injuries within the past 12 months		
Medication for long-term use		
Asthma		
Hearing Impairment		
Vision Impairment		
Dietary Needs		
Neuromuscular condition		
Seizures		
Diabetes		
Other		

If you answered yes to any of the conditions above, please explain:

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The following information is required for emergency treatment. All information is kept in the child's confidential file in the CLC office.

Health Insurance \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Names of individuals authorized to have access to health information:

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

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

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



**AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:**

In the event that a parent cannot be reached to make arrangements for emergency medical attention, please note the CLC uses Baylor Medical Center for care.

Baylor Medical Center  
 1650 West College  
 Grapevine, TX  
 817-488-7546

**CLC DIRECTORY**

The Creative Learning Center has my permission to print the following in the CLC Directory. This information is to be used by the Creative Learning Center Staff and Parents for school purposes only.

Please check all that apply:

	Yes	No
Child's Name		
Parent's Names		
Address		
Phone Number		
Email Address		

\_\_\_\_\_  
 Parent's Signature

\_\_\_\_\_  
 Date

**CLC USE OF PHOTOGRPAHY**

Throughout the school year, we may take photographs and movies of your child, both in the classroom and at CLC-sponsored events. We may use these photographs and movies, for example, at special events, in promotional publications, on our website, and on end-of-the-year DVDs. While we understand that you will also want to take photographs and videos at CLC-sponsored events, out of respect for the privacy and safety of our students, we must place certain limitations on the use of such photography. Therefore, as part of the enrollment process, we require that you enter into the following agreement:

I agree that CLC and its agents may make photographs and videos of my child at any CLC-sponsored activity, whether on or off CLC premises, and that CLC may use these



photographs and videos for any legal purpose related to the internal or external promotional and informational activities of CLC, including publishing these photographs and videos on any internal or external CLC website and in printed CLC publications.

I agree that I will not publish, cause to be published, or allow to be published, in any printed or electronic form, any photograph or video taken at CLC or any CLC-sponsored activity, whether taken by CLC, its agents, myself, or a third-party, on any non-CLC website or non-CLC printed publication. I understand that in so agreeing, while I am still allowed to take photographs and videos at CLC and CLC-sponsored activities, I must take reasonable steps to prevent such photographs and videos from being made available for viewing on any non-CLC website or in any non-CLC printed publication, including but not limited to social media outlets such as Facebook. I agree to hold CLC harmless, defend CLC, and indemnify CLC in any lawsuit based on my failure to take reasonable steps to prevent such publication.

I acknowledge that CLC has a legal obligation to report suspected child exploitation through photography, and I agree that I will report any suspected exploitation to the Director of the CLC.

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Parent's Signature

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Date

### **CLC HANDBOOK**

**The Creative Learning Center Parent Handbook: Policies and Procedures is available on the CLC website at [www.clcgrapevine.org/policy](http://www.clcgrapevine.org/policy) for your review. The password to access the file is "creative." (Copies are available in the CLC office upon request.) Please read the handbook carefully before completing the following acknowledgement and agreement. The Parent Handbook supersedes all previous handbooks.**

### **AGREEMENT:**

I have been informed of all requirements and procedures of the Creative Learning Center. I acknowledge that I have read and understand the CLC Parent Handbook: Policies and Procedures, am familiar with its contents, and commit to following these policies and procedures.

I am aware that if, at any time, I have questions regarding the CLC Parent Handbook: Policies and Procedures, I should address them with the Director.



I am aware that the Creative Learning Center, at any time, may make changes, revisions, deletions or additions with or without prior notice.

I am aware that a copy of the Texas Department of Family and Protective Services Minimum Standards for Child Care Centers, as well as the most recent licensing reports are available in the CLC office to view at any time.

I understand that a tuition is payable on the 1<sup>st</sup> day of each month and is due until the CLC is officially notified of my child's withdrawal, at which time a thirty days written notification is required. All students attending the CLC are on a probationary period for their first six weeks of school.

I understand that a 2012-2013 Health Form must be submitted before my child may attend school.

Any problems occurring at school concerning my child's health or welfare will be brought to my attention by the CLC staff. This includes exposure to communicable diseases. As a parent, I will notify the school of any problem which will affect the health or welfare of the other children.

I understand and agree with the policies of the Creative Learning Center and will work with the staff to assure that my child's experience is a pleasant and nurturing one.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

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OFFICE USE ONLY: \_\_\_ New \_\_\_ Returning \_\_\_ Church Member Date of Registration \_\_\_\_\_

Date of Confirmation \_\_\_\_\_ Program Assignment: \_\_\_\_\_ Extended Day(s): \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_