



Enrollment Application

For us to tentatively hold a spot for your child at Winnford, please let us know of your intentions by completing this form and leaving it with us (or mailing or faxing it to us later).

Enrollment Basics

Application Date: ____/____/____ Entrance Date: ____/____/____

Program /Classroom:_____

Child's Name:_____ Name Called:_____ Date of Birth:____/____/____

Sex: M F Grade in school (if applicable):_____

School child attends (if applicable):_____

Has your child been in a child care setting before? Yes No If so, for how long?_____

Address:_____ City:_____ Zip:_____

Home Phone: (____)_____ Cell Phone:(____)_____

List siblings and ages: (circle siblings that will be enrolled at Winnford Academy)

Sibling:_____ Age:_____

Sibling:_____ Age:_____

Sibling:_____ Age:_____

Please list any likes, dislikes, or things your child is frightened of or by:

Immunization Policy

Georgia law requires us to have on file for each child enrolled in our academy a current Georgia Certificate of Immunization (Form 3231). This form may be obtained through your child's physician or local health department.

The information on this form must include:

01. Name of child
02. Child's date of birth
03. Date of issue
04. Date of expiration
05. Name and address of physician or health department
06. Signature of the issuer must be readable

A photocopy of the certificate containing the above information is acceptable. The information must not be altered or changed in any way.

A current Georgia Certificate of Immunization (Form 3231) must be given to our staff within 30 days of your child's/children's enrollment.

You will be notified if your child's Certificate of Immunization form is expiring. Please be advised that the updated certificate must be presented to us within 30 days of the certificate expiring. If we do not have an updated certificate at that time, Georgia law requires us to suspend your child's enrollment to our academy until we have an updated certificate submitted.

I acknowledge and understand that by Georgia law my child is not permitted to attend Winnford Academy without the completion of Form 3231.

Parent signature: _____ Date: ____/____/____

Administrator signature: _____ Date: ____/____/____

Medical Information

Child's Name: _____ Date of Birth: ____/____/____

Address: _____ City: _____ Zip: _____

Mother's Name: _____ Cell Phone: (____) _____

Home Phone: (____) _____ Work Phone: (____) _____

Father's Name: _____ Cell Phone: (____) _____

Home Phone: (____) _____ Work Phone: (____) _____

Whom does this child reside with: _____

Physician Information

Name: _____

Address: _____ City: _____ Zip: _____

Work Phone: (____) _____ Cell Phone: (____) _____

List any allergies your child may have:

List all prescribed medications and dosages:

List special needs or medical conditions:

List and describe any physical limitations your child may have:

List all prescribed medications and dosages:

List any concerns you may have regarding your child's developments:

Note: If you have indicated that your child has special needs, we will ask you to share a copy of your child's care plan with us so that we may work to make the best environment for their needs. In some cases, the needs may be too great for the child to thrive in our environmental setting. We will work to ensure the best interest of all of our children.

Signature of parent/guardian: _____ Date: ____/____/____

Medical Information

Child's Name: _____

Marital Status: Married Divorced Separated Widowed Single

Does the child reside with both parents? Yes No

If no, please specify the arrangements: _____

Please note, legal documents specifying custody arrangements must be on file with the school.

Mother's Information

Name: _____ Name Called: _____

Address: _____ City: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Employer: _____ Occupation: _____

Work Hours: _____ Do you work from a home office: Yes No

Address: _____ City: _____ Zip: _____

Work Phone: (____) _____ ext _____

Indicate the best way to contact you: Cell Work Home

Personal email: _____ Business email: _____

Indicate the email you prefer us to use for communication: Personal Business

Father's Information

Name: _____ Name Called: _____

Address: _____ City: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Employer: _____ Occupation: _____

Work Hours: _____ Do you work from a home office: Yes No

Address: _____ City: _____ Zip: _____

Work Phone: (____) _____ ext _____

Indicate the best way to contact you: Cell Work Home

Personal email: _____ Business email: _____

Indicate the email you prefer us to use for communication: Personal Business

Medical Information

In the case of accident or illness:

Should my child become ill or injured during the time that he/she is in the care of Winnford Academy or suffer an accident of any type, the staff shall undertake to contact me as soon as possible. In the event Winnford Academy is unable to reach me immediately, it shall be authorized to secure such medical attention and care as may be necessary. The parent shall assume responsibility for payment.

Signature of parent/guardian: _____ Date:____/____/____

Signature of parent/guardian: _____ Date:____/____/____

Student Release Authorization

Child's Name: _____ Date of Birth: ____/____/____

In the event you cannot be reached or are unable to pick up your child, please list the names of three people that may be contacted. By listing these individuals you are authorizing Winnford Academy to release your child to the listed persons. In the event of an emergency, you are authorizing us to also contact these individuals and you are entrusting your child's care to these individuals. Please do not list out-of-state contacts. This area cannot be left blank; the State requires emergency contact/release information on every child to ensure safety.

First Contact

Name: _____ Name Called: _____

Address: _____ City: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____ Relationship to Child: _____

Second Contact

Name: _____ Name Called: _____

Address: _____ City: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____ Relationship to Child: _____

Third Contact

Name: _____ Name Called: _____

Address: _____ City: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____ Relationship to Child: _____

Signature of parent/guardian: _____ Date: ____/____/____

Emergency Transportation Information

Parent's Contact Phone Numbers: (____)_____ (____)_____

Child's Name: _____ Date of Birth: ____/____/____

Address: _____ City: _____ Zip: _____

Mother's Name: _____ Home Phone: (____)_____

Cell Phone: (____)_____ Work Phone: (____)_____ ext _____

Father's Name: _____ Home Phone: (____)_____

Cell Phone: (____)_____ Work Phone: (____)_____ ext _____

Whom does this child reside with:

Person to notify in an emergency and parents cannot be reached:

Name: _____

Address: _____ City: _____ Zip: _____

Home Phone: (____)_____ Cell Phone: (____)_____

Work Phone: (____)_____ ext _____

Relationship to Child:

Emergency Transportation Information

Physician Information

Name: _____

Address: _____ City: _____ Zip: _____

Office Phone: (____) _____ Fax: (____) _____

Child's allergies: _____

List all prescribed medications and dosages:

List special needs or medical conditions:

The medical facilities' the school uses is Northeast Medical Center in Gainesville and Gwinnett Medical Center in Lawrenceville.

In the event of an emergency and the parents cannot be reached, I hereby authorize any needed medical care and transportation of my child to a medical facility or evacuation location in the event the building must be evacuated.

I further agree to be responsible for all medical expenses incurred during the treatment of my child.

Signature of parent/guardian: _____ Date: ____/____/____

Witnessed by: _____ Date: ____/____/____

Transportation Agreement

Child's Name: _____ Date of Birth: ____/____/____

This is to certify that I give Winnford Academy permission to transport my child, (name of child)_____ from Winnford Academy to (name of school) _____ at ____:____AM.

My child will be transported from (location) _____ at ____:____PM to Winnford Academy on the following days (circle all that apply):

Monday Tuesday Wednesday Thursday Friday

Name of Child: _____ from Winnford Academy to (name of school) _____ at ____:____AM.

My child will be transported from the following school _____ at ____:____PM.

Winnford Academy is authorized by the parent to transport the child to and from said School and deliver the child to the main drop off point of the school in accordance with the public school policies for drop off and pick up. I understand that the child is released into the care of the public school employees. In the event that the school has an emergency and/or the authorized persons are unable to receive the child, the child will be transported back to Winnford Academy.

Name of person authorized to receive the child:_____

The school is approximately ____ miles from Winnford Academy.

In the event my child is not to be transported as outline above, I agree to notify Winnford Academy by 12:00 pm.

Signature of parent/guardian: _____ Date:____/____/____

Witnessed by: _____ Date:____/____/____

Authorization to Dispense External Preparations

590-1-1-.20(1)

Parental Authorization:

Except for first aid, personnel shall not dispense prescription or non-prescription medications to a child without specific written authorization from the child's physician or parent. Such authorization will include, when applicable, date; full name of the child; name of the medication; prescription number, if any; dosage; the dates to be given; the time of day to be dispensed; and signature of parent.

I give Winnford Academy, permission to apply one or more of the following topical ointments/preparations to my child in accordance with the directions on the label of the container.

_____ Baby Wipes

_____ Band-aids

_____ Neosporin or similar ointment

_____ Bactine or similar first aid spray

_____ Sunscreen

_____ Insect Repellent

_____ Non-Prescription ointment (such as A & D, Desitin, Vaseline)

_____ Baby Powder

Other (please specify) _____

Signature of parent/guardian: _____ Date: ____/____/____
*center should maintain in child's file

Parental Agreement Summary

I attest that the information provided in the application for enrollment with Winnford is accurate and true.

I agree to update any information pertaining to my child or any information contained herein if it changes in a timely manner

I agree to adhere to the policies and procedures of Winnford as contained or referenced herein and as may be properly updated from time to time.

I will conduct myself on the Winnford Academy campus in an orderly and respectful manner including refraining from inappropriate remarks, language, slurs, or any actions that could be harmful or inappropriate for children.

I agree that I have received an additional copy of the Winnford Application for Enrollment Package.

I acknowledge on this ____ day in the month of _____, in the year 20____.

Signature of parent/guardian: _____ Date:____/____/____

Received by: _____ Date:____/____/____
Winnford Academy Administrator



Parental Agreement

Ages of Children Served: Six weeks through twelve years of age

Months of Operation: January through December

Days of Operation: Monday through Friday

Hours of Operation: 6:30 a.m. to 6:30 p.m.

Parental Agreement Summary

This document represents the agreement between Winnford Academy (hereinafter referred to as “Winnford” and the parent or legal guardian (hereinafter referred to as “the Parents”) of the child or children placed with the Academy.

1. Parental Rights

1.1. Legal guardians have the right to have access to their child at any time while the child is in the care of the Winnford with or without advance notice.

1.2. All children’s records, parent information, and billing information are kept confidential with exemption for past due accounts. The Parents have the right to review their child’s records as needed. A copy of their child’s record will be made available upon request. Only Winnford staff, The Parents, or governmental agencies authorized by law are allowed access to children’s files.

1.3. The Parents have the right to request a statement of their tuition account activity.

1.4. The Parent(s) have the right to receive timely notice of injuries, illness, or other emergency information regarding their child. The Parents are informed that Winnford is **required by law** to notify appropriate authorities when Winnford has **ANY** cause to believe that a child may be the victim of abuse.

1.5. Winnford makes every attempt to accommodate children with special needs; however, we are prohibited from enrolling children whose needs Winnford is not equipped to safely and properly handle due to inadequate training, staffing, or physical layout.

1.6. Winnford reserves the right to terminate this agreement immediately via phone or in person provided the child is no longer in the care of Winnford. Written confirmation of the termination will be mailed within 48 hours.

1.7. Advanced notification of any pending change to Winnford’s Policies and Procedures will be posted for a period of not less than five business days on the front door of the school, and the updated policy will be included in the next parent newsletter from Winnford. These notifications will clearly state the effective date for the new policy. The Parents agree to be bound by these changes unless they notify Winnford in writing within ten days of the date of the change.

Parental Agreement Summary

Parental Responsibilities

1.8. The Parents are required to submit the Winnford Academy Application for Enrollment Package requesting that their child be enrolled with Winnford Academy, LLC (Winnford).

1.9. The Parents agree to provide the above forms completed and signed before their child's first day of enrollment. No child can be admitted without all forms being completed, signed, and submitted to Winnford. The Parents also understand and acknowledge that they are bound by the information and policies contained in these forms.

1.10. The Parents must keep all contact information current at all times to ensure the safety of their child. This includes; cell phone, home phone, work phone, home address, email address, emergency contact, authorized pick up, and employment information including name of employer, address, and phone number. In the event of an emergency, it is vital that we have current contact information. We have had occasions where we had children who were desperately ill, and the parent's cell phone and/or work numbers had changed making it difficult to promptly inform the Parent of the emergency.

1.11. The Parents also agree to provide updated information including; immunization, billing, contact, authorized pickup, transportation agreements, or other items as required by either Winnford policy, or by Local, State, or Federal regulations while their child is attending Winnford.

1.12. The Parents must pick up their children in compliance with the Winnford Academy Policies and Procedures. In cases where a child remains at Winnford 45 minutes after closing time, and Winnford has been unable to contact the Parents or designated emergency contacts, Winnford will contact the Hall County Sheriff's office for further instructions on the disposition of the child.

1.13. The Parents are expected to actively provide feedback on any issues, concerns, or observations regarding the service being provided by all members of the Winnford Team, and any health or safety questions. We value your feedback (both positive and negative), and we believe your child will be most successful when we collaborate through open communication. We strive to create an environment at Winnford Academy that allows your child to thrive physically, emotionally, and intellectually. We need your partnership to achieve this goal. Parents will be provided a business card with all Winnford Academy contact information.

1.14. The Parents agree to keep diaper bags and backpacks free of all items that may cause harm to children including but not limited to plastic bags, nail clippers, lip balm, stickers, power drink powder, over-the-counter medicines, and prescription medications.

Parental Agreement Summary

2. Medical

2.1. Control of Infectious Diseases

2.1.1. It is Winnford's policy to combat the spread of infectious diseases at the school aggressively. Teachers and children who are actively sick will be asked to leave the school per the guidelines listed below.

2.1.2. Parents agree to notify Winnford of changes to their child's medical condition including, but not limited to:

- Prescription medications,
- Allergies,
- Developmental or psychological issues,
- Pending surgeries, or
- Other medical concerns.

2.1.3. This includes promptly notifying Winnford when their child is diagnosed with any illness or possible contagious illness so that appropriate notice may be posted at Winnford.

2.1.4. The Parents agree to follow the Childhood Infectious Diseases Chart provided by the State of Georgia Department of Health regarding their children being able to attend school or return to school after being absent due to illness. Children may return to Winnford only when they meet the criteria in the Childhood Infectious Diseases Chart or with a written exemption from a doctor or the Georgia Department of Health.

2.2. Determining Medical Conditions

2.2.1. Winnford is not responsible for the determination of medical conditions. Winnford will make the best guess determination regarding children's conditions. A letter from a medical doctor is needed to properly establish a prognosis. For example, if a child appears to have pink eye, the child is required to leave Winnford. If the child's eye is pink and has a severe discharge from allergies, the child may return only with a doctor's note confirming the allergies. Parental opinion regarding medical conditions is not acceptable.

2.2.2. Winnford does not make assessments of specific developmental or psychological conditions. In the event that the staff at Winnford has a concern in this area, an administrator will recommend a referral to the child's pediatrician. In the event that a child presents a danger to themselves or others due to developmental or psychological disorders, they will no longer be allowed to attend Winnford.

Parental Agreement Summary

2.2.3. The Parents agree to pick up their child within two hours of being notified that their child is too ill to continue to attend Winnford. After the two-hour notification period has expired, Winnford will move the child to isolation at the school, and assign a teacher to individually care for the child until the parent arrives. The fee for this service is \$20 per hour rounded up to the nearest hour. Depending on the severity of the child's condition, Winnford may contact emergency services to care for the child. Common conditions requiring the child to leave the school are:

- If the child has a temperature of 100.4 degrees or more.
- If the child has two vomiting episodes within a 2-hour period.
- If the child has three diarrhea episodes within a three-hour period.

2.2.4. Should Winnford Academy be unable to contact a parent, legal guardian, or designated emergency contact, the steps and fees described above will be applicable.

2.2.5. Other conditions may require the child to leave as determined by Winnford staff.

2.3. Administering Medicine

2.3.1. Medications must be in their

- Original container from the manufacturer,
- Labeled with the child's name,
- The dose amount clearly specified, and
- The pharmacy label is attached (for prescription medications).

2.3.2. Winnford does not administrate any over-the-counter medications. A prescription from a medical doctor is required for treatment.

2.3.3. Winnford Academy will make reasonable attempts to administer prescriptions with proper written authorization. Winnford is not a medical clinic. Winnford reserves the right to refuse to administer medications that require an injection, require multiple or frequent doses, require medical training, are not properly prescribed, or if it is Winnford's best judgment that administering the medication poses any potential risk to the child, other children, or staff.

2.3.4. Winnford is not allowed to accept prescriptions from chiropractors.

2.3.5. Per state law, open-ended or indefinite treatment plans are not acceptable. Ongoing medication treatments of more than one month require a letter from a doctor indicating the start and end date for the treatment.

2.3.6. Per state law, children may be excused from outside play for a maximum of five school days upon written request by the Parents. Children must participate in outside play after five days unless a medical excuse is provided.

Parental Agreement Summary

2.4. Allergies

2.4.1. Children with allergies requiring medical treatment must complete a “Medical Allergy Reaction Plan” Appendix B. This form must be signed by a doctor. For the child’s safety, children with severe allergies are not allowed to attend Winnford without this completed form on file.

2.4.2. Winnford has several children with severe life-threatening nut allergies. For this reason, Winnford is a “Nut Free Campus.” This includes any candy or food with peanut butter or almond butter or food produced at facilities that use peanuts in the production of any food item. Parents are prohibited from bringing any items mentioned above.

2.5. Emergency Medical Care

Parents authorize Winnford to contact emergency services as needed when the staff at Winnford deems taking such action necessary for the health and welfare of a child.

Parental Agreement Summary

3. Payment of Tuition and Fees/Active Enrollment

3.1. Tuition and Fees

3.1.1. Parents agree to follow the Tuition Schedule.

3.1.2. For the convenience of our families, payments are evenly divided throughout the school year. Tuition payments are the same each billing cycle, and aren't adjusted based on a child's attendance or dates we are open.

3.1.3. Payments must be set up by EFT from your checking or credit card account.

3.1.4. If a refund is due, it can be credited to your account. Or, a refund can be issued to the credit card used, or we can cut a refund check. Refunds will be processed within 10-15 business days.

3.1.5. A \$35 late fee will be applied automatically by our billing system every Tuesday. This also means that if the first time your child attends Winnford after Tuesday morning, you will need to either pay the week before or come by the center to pay no later than Tuesday morning.

3.1.6. Tuition is paid via automatic payment on the scheduled billing date.

3.1.7. Children picked up after 6:30 p.m. are assessed a late pick-up fee of \$1.00 per minute.

3.1.8. An annual registration fee of \$100 per child or \$135 for families of two or more children is charged each year on the second Monday in August. This fee applies to all children who will be attending Winnford for the next school year regardless of the number of days of attendance.

3.2. Active Enrollment

3.2.1. A child's tuition is not pro-rated based upon a child's actual attendance due to illness, a parent's work schedule, vacation, or other reasons.

3.2.2. While parents are allowed to make tuition payments weekly, Winnford Academy is staffed accordingly to support enrollment; hence, tuition accrues regardless of attendance until the student is withdrawn.

3.2.3. Tuition is not prorated due to inclement weather.

3.2.4. Tuition is not prorated due to regularly scheduled holidays.

3.3. Transitions

3.3.1. Your child's transition into Winnford should be a positive and exciting learning adventure. We will work with you and your child to ensure the smoothest possible transition occurs as new routines and new people are introduced.

Parental Agreement Summary

3.3.2. Prior to your child's first day, you will have an opportunity to tour the center, meet with your child's peers and teachers, and communicate any anticipated concerns. At this time please share the best communication methods that the teacher may use to reach you.

3.3.3. Children are transitioned to the next classroom based on age, developmental readiness, and space availability. During the transition, students will take two weeks to get acclimated to the new classroom. The administration and the teachers will speak with the parents on the smoothest way to adjust for the student. If the student does not need the full two weeks then they are able to fully move to the classroom.

3.4. Returned Checks and Overdraft Fees

3.4.1. A late fee of \$35 is applied to any automated payments that are declined due to the parent's account being "Over the Limit."

3.4.2. A \$35 fee is applied to any returned checks.

3.5. Withdrawal Fees

Termination of tuition charges occurs only after two full weeks from the time written notice of the student being withdrawn from Winnford is provided, or two weeks from the last date of a child's attendance in the event Winnford is unable to contact the parents. If the required time of notice is not given, the parents will be charged for the full 2 weeks along with any applicable

3.6. Delinquent Accounts

3.6.1. The children of parents whose accounts are more than 2 days past due are allowed to attend Winnford once their account is brought current.

3.6.2. The Parents will be charged the normal tuition rate the second and third week to hold their spot regardless of the child's actual attendance at Winnford. During this time their child will be eligible to return to Winnford provided their tuition is brought current. After the third week, the child will be withdrawn from Winnford, and no longer eligible to return until the balance has been paid in full. Classrooms typically have a waiting list, and this could result in your child losing their reserved spot on the class roll.

3.6.3. Parents agree to pay any legal fees associated with collecting past-due accounts.

3.7. Vacation Policy

3.7.1. One week of free vacation is available per student per calendar year provided written notice is given to Winnford a minimum of two weeks before the vacation.

3.7.2. Yearly vacation credits cannot be used as one of the two-week withdrawal notices.

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3.8. Withdrawal

3.8.1. A minimum of 2 weeks' written notice is required for withdrawing. If the required time of notice is not given, the parents will be charged for the full 2 weeks along with any applicable late and collection fees.

Parental Agreement Summary

4. Drop-Off and Pick-Up Procedures

4.1. Drop-Off/Pick-Up

4.1.1. A parent should notify the center by 9:00 am whenever a child will not be attending on a scheduled day. Teachers will attempt to wait to start all activities when all children have arrived, so a timely notification is appreciated. The Director should be notified if a child is ill. This will enable the staff to keep track of any illness that may occur at the school.

The cut-off for drop-off is 9:00 am, your child will only be allowed to come in after that time with a doctor's note.

4.1.2. The Parents must use only the main entrance. The playground gate is for emergency use only.

4.1.3. Security door codes and login codes are for the parent's use only. All other people picking up children must be cleared by an administrator at the reception desk and present a valid picture id.

4.1.4. The Parents are required to escort their child to their assigned classroom and sign in their child at the front desk kiosk.

4.1.5. Georgia Pre-K parents will be able to sign the attendance sheet at the curbside drop-off point in the morning and afternoon.

4.1.6. When dropping off, parents are responsible for their child until their child is in the appropriate classroom, and the child has been acknowledged by their teacher.

4.1.7. When picking up, the Parents are responsible for checking in on the ProCare system at the front office

4.1.8. The parent is responsible for their child once their child's teacher has acknowledged the parent's presence in the classroom. Once the child has been released to the parent's custody, the parent is responsible for ensuring the child does not leave the center un-escorted.

4.1.9. State law prohibits tobacco usage on any school premises including the parking lot.

4.1.10. Parents should always be alert to the movement of children in the parking lot as children arrive and exit Winnford. The speed limit in the parking lot is 5 miles per hour.

4.1.11. Car seats may be left at the reception desk as needed. Winnford staff will assist with carrying the car seats to and from the building to a parent's vehicle. State law prohibits staff from securing the car or booster seat, or from securing the child into their seat.

4.1.12. Winnford will not release a student to any individual under the age of 18 unless stated in your authorized pickup list or anyone who is impaired.

Parental Agreement Summary

5. Weather and Holiday Information

5.1. Inclement Weather Policy

5.1.1. Winnford will make every reasonable attempt to open on time and remain open in the event of inclement weather. However, it may become necessary for the school to cancel classes or delay opening. Winnford reserves the right to open if in the judgment of Winnford doing so does not pose a risk to the children, staff, or parents of Winnford.

5.1.2. Closing due to inclement weather follows the same plan as a medical emergency. Parents have a two-hour notice, and then Winnford will apply a \$1 per minute late fee OR call emergency services at our discretion.

5.2. Regularly Scheduled Holidays

5.2.1. Winnford Academy will provide a yearly calendar with school closings at the beginning of the calendar year.

6. Behaviors

6.1.1. Not all children thrive in a group setting. If a child behaves in an aggressive or violent way that threatens safety, the parents may be asked to remove the child from the school. Every effort will be made to work with the parents to reach the best solution possible. This decision is based on the best interest of your child, other children in the class, and our teachers. Withdrawal may be the result of abuse of other children, teachers, or property by a child, parent, or guardian; continued violations of procedures and policies by child, parent, or guardian; inappropriate conduct by parent or guardian; or non-payment of tuition. Every effort will be made to correct a situation beforehand when possible.

6.1.2. As young children discover their own personalities, responsibilities, and independence, they may encounter difficulties with other children and rules. We strive to provide the most harmonious environments, but in the event that the teachers must intervene, we have outlined our most common techniques.

6.1.3. AT NO TIME DO TEACHERS USE PHYSICAL PUNISHMENT, SHAMING OR WITHHOLDING OF FOOD OR BATHROOM PRIVILEGES.

7. Video/Photograph Release

7.1.1. Parents understand that Winnford may occasionally use pictures of their child either in the classroom or on the classroom website. No identifying information is given in either case, and Winnford does not publish or otherwise use children's pictures or likenesses (other than those mentioned above) without specific written authorization from the parent.

7.1.2. Video or pictures of students may be released to social media or to parents with children currently enrolled at Winnford.

Parental Agreement Summary

8. Teacher Relationships and Professional Boundaries

8.1.1. Parents who wish to use a member of our Winnford Academy staff for babysitting will need to notify a member of management for it to be approved.

8.1.2. Teachers are prohibited from providing their personal contact information including, but not limited to, cell phone number, personal email, home address, home phone, or social media information.

9. Notices

9.1.1. Written notices may be delivered to Winnford via email at admin@winnford.com, via regular mail to 5796 Hog Mt. Rd, Flowery Branch GA 30542, delivered via fax to 770-945-3918, or hand delivered to an administrator.

9.2. Parent Participation

9.2.1. Winnford encourages parents to participate in their children's school day. Parent's that wish to volunteer to read books, tell stories, teach crafts, teach students about specific cultures or culture activities, eat lunch or snack, or in any other way should speak with their teacher or an administrator to schedule a time for their activity to be integrated into the daily lesson plan and schedule.

10. School Day

10.1. Infant Items To Bring

10.1.1. Each Infant is provided his/her own crib, crib sheets and mattress upon enrollment. The parent must provide:

10.1.2. Receiving Blanket or Blankets.

10.1.3. 2-3 changes of clothes appropriate to the season.

10.1.4. Diapers and Wipes

10.1.5. Any food or formula to be served.

10.1.6. Sweater, Jacket, sweatshirt, and a hat.

10.1.7. Parents are responsible for washing the blankets once a week, typically on Fridays. Please note, due to Federal SIDS prevention and State Policy, no blanket will be allowed in a crib. Please have plenty of clothes to dress your infant in layers to keep he/she comfortable during nap times. (The only blanket that will be allowed in cribs is the Blanket Systems, please see a director for more information). All food, bottles, and clothing should be labeled with the child's first and last name. Bottles and caps will need to be re-labeled often. Bottles with milk or formula must also

Parental Agreement Summary

be dated and should already be filled. Refrigeration is provided for storing bottles and food.

10.1.8. Please remember to label all items brought to the school. Winnford Academy cannot be held responsible for any lost, stolen, or broken items.

10.2. Toddlers and Preschoolers

10.2.1. Two full changes of clothing including socks, An oversized shirt or smock for messy activities, Diapers and wipes, and many extra sets of underwear if “in training”. Two blankets for naptime, a favorite sleep toy can also be provided. If a child requires a specific type of “sippy cup”, it must be provided and labeled.

10.2.2. All items brought to school should be conspicuously labeled. Extra clothing should be provided as the seasons change and the child grows. Feel free to leave clothes in the child’s cubby in a labeled bag and change them out weekly. Rubber-soled, closed-toe shoes are the most appropriate school shoes. Appropriate outdoor apparel is needed daily as every effort is made to have the state-required outdoor time. Additional sets of clothing and underwear will be needed when potty training. Blankets should be taken home weekly to be laundered. During Summer Camp, a bathing suit, towel, and water shoes are required. Toeless and backless shoes are not permitted.

10.2.3. Please remember to label all items brought to the school. Winnford Academy cannot be held responsible for any lost, stolen, or broken items.

11. Rest Time

11.1.1. Children in the Toddler and Preschool classes are required to lie quietly on their sleeping mats or cots for a minimum of 30-45 minutes. This allows those children who do wish to sleep a quiet length of time in which they may do so. Quiet music is played, the lights are dimmed, and it is a period of relaxation for non-nappers as well. Those children who do not fall asleep during the initial quiet time are given the opportunity to select quiet activities such as books or puzzles to occupy themselves while their classmates rest. Infants will rest on individual schedules of time and length. Infants that cannot turn over on their own will be placed in the crib, lying on their backs only unless a medical reason supported by a physician’s note states otherwise.

11.2. Before and After School Students

11.2.1. Winnford Academy After School Program is dedicated to being the best in the area. Students enrolled in our Afterschool will be offered the very best in a homework/tutor environment, an arts and crafts environment, and an organized physical development area. If your child attends our After-School Program, we must know what school your child attends. Our facility will provide transportation to and from your child’s school and on planned field trips.

11.2.2. A school transportation form must be signed at the beginning of each school year or at the time of enrollment. If your child is transported to or from school, we will not leave children at the drop-off site without proper supervision. In the event, no one is at the drop-off site, the bus

Parental Agreement Summary

driver will remain with the children until someone arrives. If after 5 minutes no one has arrived, the children will be returned to the center.

11.2.3. Winnford Academy does not provide transportation to students under 5 years old.

11.3. Infant Feedings

11.3.1. Parents of Infants must send prepared bottles of breastmilk or formula that are clearly labeled with the child's first and last name along with the date. Arrangements may be made for mothers who wish to breastfeed their infant. Instructions regarding a feeding schedule must be provided by the parents on Infant Feeding. Form and updated monthly. Infant bottles will be reheated in hot water for 5 minutes, shaken, and temperature tested before serving.

11.3.2. Any contents remaining after feedings will be discarded, therefore it is suggested that bottles be filled with the amount the child will drink. As solid foods are introduced, parents are requested to bring labeled jars or small containers of food. Infants can also be introduced to the food that is being served on the menu in the center that day and will be cut to appropriate sizes for small children. All food sent from home should be clearly labeled and placed in the refrigerator upon arrival. If the food requires reheating, it will be done in the microwave to approved temperatures.

11.4. Meals and Snacks

11.4.1. Winnford Academy provides Breakfast, Lunch, and afternoon snacks daily. These meals and snacks meet or exceed all requirements from Georgia Bright from the Start and the FDA's recommendations. All meals are from the 5 food groups, and recipes or nutritional information is available upon request. 100% Fruit Juice or Milk is served with all meals and snacks. Menus are posted in the lobby and extra copies are available in the office.

11.4.2. Each child will be encouraged to eat the balanced meal that has been provided. However, if the child refuses certain foods, he/she will not be forced to finish the meal. Please review the Procure App to see how your child ate that day. Please see the Nutrition Charts located in the lobby of the center to see the plan we are following to prepare healthy meals and snacks.

11.4.3. Breakfast is served from 8- 8:30 am. If you wish to have your child eat breakfast here, you must arrive before this time. No outside food is allowed in the building (baby food excluded) unless the child is under a doctor's care and the center is provided documentation. The only exception to this rule is Birthday Parties, and the food must be Store-Bought and approved by a Director

11.5. Allergies

11.5.1. If your child is allergic to any foods, the center must be notified by means of a doctor's note. The kitchen and your child's room will be notified. Please watch the posted menu and make note of any items your child may be allergic to. Due to the increase in allergic reactions of many children to peanuts, we are now a peanut sensitive school.

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11.6. Toilet Training

11.6.1. Toilet Training is one of the physical development's children acquire between the ages of 2 and 4. As a skill, it must be reached in a child's own time. Winnford Academy has a program that has been designed and scheduled to provide ample opportunities to foster this skill. During this process, diapers should be replaced by regular underwear. Accidents are inevitable, and a large supply of underwear and other clothes should be on-hand. Please see anyone at the front desk for a copy of our Toilet Training Guide.

11.7. Field Trips

11.7.1. Periodic field trips may be planned to provide the children with exposure to learning experiences in our local community. Prior to each trip, information will be provided outlining the date, time, cost, location, chaperones, means of transportation, etc. The permission slip must be signed by the date requested for the child to attend. Understand that any child that is to go on the Field Trip must be transported to and from the event by the center. For security reasons, a child will not be allowed to be picked up from the event by the parent, or to be transported by the parent.

11.8. Birthdays

11.8.1. Please contact the Center Director for information on planning a birthday celebration at the center during the school day.

12. Equal Educational Opportunity

12.1.1. Eligibility for enrollment at Winnford is NOT based on religious belief, gender, race, national origin, or ethnicity. Children with physical or mental disabilities are eligible for enrollment at Winnford with the exception that State of Georgia law prohibits Winnford Academy from accepting children with disabilities or medical conditions requiring specialized care for which Winnford is not properly equipped to meet.

13. Inclusion

13.1.1. Winnford believes that children of all ability levels are entitled to the same opportunities for participation, acceptance and belonging in child care. We will make every reasonable accommodation to encourage full and active participation of all children in our program based on their individual capabilities and needs.

Parental Agreement Summary

I attest that the information provided in the application for enrollment with Winnford is accurate and true.

I agree to update any information pertaining to my child or any information contained herein if it changes in a timely manner

I agree to adhere to the policies and procedures of Winnford as contained or referenced herein and as may be properly updated from time to time.

I will conduct myself on the Winnford Academy campus in an orderly and respectful manner including refraining from inappropriate remarks, language, slurs, or any actions that could be harmful or inappropriate for children.

I agree that I have received an additional copy of the Winnford Application for Enrollment Package.

I acknowledge on this ____ day in the month of _____, in the year 20____.

Signature of parent/guardian: _____ Date:____/____/____

Received by: _____ Date:____/____/____
Winnford Academy Administrator