

# **Lakeside Academy**

## ***Admission Requirements***

**The following is a checklist of requirements that we will need to have to before we can admit your child into our program:**

**Interview with the parent or guardian and prospective student.**

It is important to determine whether or not we may be able to meet your needs and that of your child's before you enroll.

**Tour our facility.**

This is a great time to ask any questions about our programs, facility, or curriculum.

**Immunization record.**

The yellow immunization card should show all the required shots that have been administered in accordance with the California State immunization requirements. We reserve the right not to accept waivers.

**Physician's Report (due within 30 days of enrollment).**

A TB test is not required, but if the doctor administers a TB test, the results must be read and recorded on the Physician's report.

**\$100.00 registration fee**

This is a one-time fee and must be paid at the time of enrollment.

**Completed application.**

Please fill out the application in its entirety.

Thank you for choosing Lakeside Academy. We look forward to having you as part of our school. If you have any questions, please contact us at (760) 245-8680 or check out our website at [www.lakesideacademy.com](http://www.lakesideacademy.com).

# Lakeside Academy

12303 Ridgecrest Rd. Victorville, CA 92395

760-245-8680

Lic.# 364842016, 364842017

## Child Care Application for Admission

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: Residential: \_\_\_\_\_

Mailing: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parents Names: \_\_\_\_\_

Email address: \_\_\_\_\_

Registration Fee: \$100.00 Enrollment Date: \_\_\_\_\_

A registration fee must accompany this application. The registration fee is non-refundable once the school has enrolled your child.

Tuition: Full Days (hours) \_\_\_\_\_ Half Days (hours) \_\_\_\_\_  
Days \_\_\_\_\_ Days \_\_\_\_\_  
Amount/Week \_\_\_\_\_ Amount/Week \_\_\_\_\_

Please read, initial and sign the following:

I understand that tuition is to be paid on or before the first scheduled day of the week. Payment not received by the end of the second day will be assessed a \$5.00 late fee. If tuition is not paid by the end of the week, the child will not be allowed to return to the center. Tuition allowance will not be granted for sickness or vacation until the beginning of the 2<sup>nd</sup> consecutive week. At that time, tuition will be billed at 50% of the regular rate until the child returns. \_\_\_\_\_

Full legal signature is required when signing your child in and out daily. \_\_\_\_\_

All payments returned for non-sufficient funds will be charged a fee of \$15.00 and a \$5.00 late fee. \_\_\_\_\_

I understand there will be an overtime charge of \$5.00 for children not picked up by 6:30 p.m. and an additional \$5.00 for every 15 minutes or portion thereof after. \_\_\_\_\_

I understand I will be charged the full day rate if my child is scheduled for half-day and is not picked up by 12:30. \_\_\_\_\_

If a child is being withdrawn from school for any reason dropping days, a two-week notice is required. Unused credit on account will be refunded. \_\_\_\_\_

I agree to abide by all the policies and procedures as printed in the Parent Handbook, which I acknowledge that I have received. \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_

## **Social Services Right to Interview Children**

It is our duty to inform you that should our licensing agency, Department of Social Services Community Care Licensing Division, find it necessary to protect your child, they have the right to interview your child or our staff and audit our records on our premises without prior consent.

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

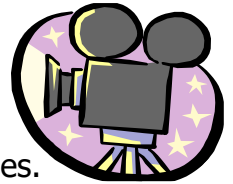
\_\_\_\_\_  
Date

## **Photo/Media Release**

Occasionally we take pictures of our students during class parties or special activities to display in the classrooms for parents and students. We would also like to request your permission to use these pictures for promotional purposes such as yearbooks, photo presentations, for our website, or to send to the newspaper.

\_\_\_\_ Yes, I give permission for Lakeside Academy to use my child's photo for promotional purposes

\_\_\_\_ No, I do not want my child's photo to be used for promotional purposes.



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

\_\_\_\_\_  
Date

## **Termination of Child Care Contract**

Lakeside Academy may terminate a child care contract at any time for any reason, but shall terminate enrollment for such causes as:

1. Failure to pay tuition and/or late fees. The first offense is grounds for termination.
2. Repeatedly late picking up or dropping off child.
3. Inappropriate verbal or physical confrontation with staff or clientele. The first offense is grounds for dismissal.
4. Child is repeatedly disruptive, destructive, and/or aggressive to staff, students, or school property.

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

\_\_\_\_\_  
Date