

LOS ALAMITOS UNIFIED SCHOOL DISTRICT
CHILD DEVELOPMENT CENTER
10293 Bloomfield Street
Los Alamitos, California 90720
Telephone (562) 799-4585
WAITING LIST APPLICATION

Child's Name _____ Birthdate _____

Male _____ Female _____ School Year of Wanted Enrollment _____

Address _____ City _____ Zip _____

Parent/Guardian Name _____ Email _____

Contact Phone # _____

Parent/Guardian Name _____ Email _____

Contact Phone # _____

Program Needed (Please identify "1st" and "2nd" choice option)

Full Day (6:30-6:00) (M-F) _____ (M-W-F) _____ (T-Th) _____

Site Choice: _____

Half Day Programs

LAECDC (8:30-11:30) OR (12:30-3:30) (M-F) _____ (M-W-F) _____ (T-Th)

Weaver CDC (8:30 – 11:30) OR (12:30-3:30) Monday-Friday only

I have read and agree to program policies listed on the reverse side.

Parent/Guardian Signature _____ Date _____

* OFFICE USE ONLY

Date Received _____

Contact Information :

Date Enrolled _____ Check # _____

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Agreements/Fees and Tuition

By placing my child on the waiting list of the Los Alamitos Child Development Center, I understand that I will be contacted as soon as there is a space available for my child. If after three attempts to enroll my child by the school without enrollment, my child will be dropped from the waiting list.

Before my child is fully enrolled in the Los Alamitos Child Development Center, I will have paid the annual registration fee and the first month tuition, along with all the necessary paperwork.

REGISTRATION FEE and TUITION IS NON-REFUNDABLE.

Tuition fees are based on a daily fee multiplied by the number of school days. That amount is divided into equal payments for the school year. Tuition is due and payable each month on the 1st. Tuition not paid by the 10th of the month will have a 10% late fee assessed. Tuition not paid by the 15^h of the month, child will be discontinued from the center until all fees are paid. All returned checks will be assessed a \$30 fee.

I understand that if I withdraw my child or change his/her schedule at any time, *written notice* must be given to the coordinator two weeks prior to the change and the daily rate will be applied to tuition owed to the date of the withdrawal or change of schedule. Any child not picked up by the closing time (6:00 for full day/11:30 or 3:30 for half day) will be charged \$5.00 for the first five minutes or portion thereof and \$1.00 for each additional minute. Any child not picked up within 30 minutes after the closing of the center without parent contact, will be placed in the custody of the local police department. After the 3rd occurrence of excessive lateness, the child will be dismissed from the Child Development Program at the discretion of the Coordinator. All overtime charges for late pick up are due at the time of occurrence. Only the parent/guardian or authorized adult (18 years or older) designated on the Authorization sheet can sign in or out a child from the program.

Preschool Requirements

Prior to my child's attendance in the Child Development Program, I agree to supply the Los Alamitos Unified School District with the necessary registration packet including (1) a licensing form-physician's report completed by a physician (2) immunization records (3) Emergency cards (4) Authorization sheet and other licensing paperwork.

Children must be completely toilet trained and at least 3 years of age prior to admission.

I understand that the State of California Community Care Licensing representatives have the authority to speak with my child at any time. We provide free health screenings to all preschool children by our school readiness nurse and I understand that I agree to allow my child to participate in these screenings.

Illness/Emergency

Children that are ill or have symptoms of illness, such as vomiting, fever, or diarrhea, may not attend school until they are symptom free for 24 hours. When my child becomes ill or injured at the Child Development Center, I will immediately be notified and expected to pick my child up PROMPTLY. If the emergency is such that immediate hospital attention is necessary, I agree that the Child Development Center Staff may contact local paramedics and I will be responsible for all my child's emergency medical expenses. Refunds of tuition fees will not be made for illness or absence.

Behavior/Discipline Standards

I understand that when the behavior of my child is disruptive to the Child Development Program and prevents the program from being beneficial to him/her or others in the program, my child may be dropped from the program following conferences with parents.