208 North Providence Road North Chesterfield, VA 23235 (804) 560-7808 learning-playhouse.net

## Requirements for our Preschool Program

Completed Application

Child's Information
Parent Information
Physician's Information (Name, Address, and Telephone Number)
Two Emergency Contacts (Address and Telephone Number)

- Current Physical Examination with Immunization Record School Entrance Health Form
- Proof of Identify
  Birth Certificate, Hospital Card, or Passport
  - Blanket Permission Form
  - Picture/Video Release Form
  - Blanket
  - Change of Clothes



# The Learning Playhouse Child Enrollment Form



#### **Child Information**

Cilità illiorillacion							
Last Name	First Name	Middle Name	Nicknam	е	Sex	Birth Date	
Street Address		City	State		Zip	Home Phone	
Allergies/Chronic Physic	al Problems/Disease	 es/Pertinent Information.	/Special Acc	ommodatio	ns Need	 ed	
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				<u> </u>			
If Child Attends School F	rogram (Name and	Location)	Previous	Child Care	9		
Parent/Guardian Inform	nation						
Father		ace Employed		Business	Phone		
Business Address				Cell Phon			
business Address				Cell Phon	e		
Home Address				Home Pho	one		
Mother	Pla	ace Employed		Business	Dhone		
Motriei	1 10	ice Employed		Dusiness	TIOTIC		
Business Address				Cell Phon	e	<u></u>	
Home Address				Home Pho	one		
Person(s) or Agency Hav	ing Legal Custody of	f Child					
Home Address				Home Pho	one		
Business Address				Business	Phone		
Dusiness Address				Dusiness	HOHE		
Emergency Information	<u> </u>					N.	
Child's Physician		Address				Phone	
Persons to Contact if Pa		Complete Address	Relati	ionship	F	Phone	
Reached (MUST BE LOCA	\L)						
(1)							
(2)							
Parsons Authorized to D	ick Up Child						
Persons Authorized to Pick Up Child							
Person(s) NOT Authorized to Pick Up Child*							

<sup>\*</sup>Appropriate paperwork such as custody papers shall be attached if a parent is not allowed to pick up the child

(Over)

#### **Financial and Liability Agreements**

By initialing each of the following paragraphs and signing this document the parents and/or guardians of the child being enrolled and The Learning Playhouse (collectively known as "the parties") agree to meet the following financial obligations and conditions for limiting liability:

participate in field trips and other activities. A copy o	It complete a blanket permission form authorizing the child to f such blanket permission form has been provided with this of the same and is made a part of this Agreement by reference
2. The Learning Playhouse (hereinafter "TLP") shall notify whenever this child becomes ill, (See Handbook for definition the child, or have the child picked up by an authorized individual (Initial)/(Initial)	on of "ill"), and the parent(s) and/or guardian(s) shall pick up
3. The parent(s) and/ or guardian(s) authorize TLP to obtain occurs and no parent or guardian authorized to give permiss(Initial)/(Initial)	n immediate medical care for their child(ren) if any emergency cion for emergency care can be located immediately.
4. The parent(s) and/ or guardian(s) acknowledge they have conditions, and policies contained in the TLP handbook whice(Initial)/(Initial)	
	ithin 24 hours or by the next business day, whether their child eloped a reportable communicable disease, as defined by the which must be reported immediately.
6. Tuition is due by Wednesday of each current week. The provide TLP with two (2) weeks prior notice to anticipated not provided, the parent(s) and/or guardian(s) shall be final following withdrawal, whether or not the child attends TLP(Initial)/(Initial)	withdrawal of the child. If two (2) weeks' advance notice is nicially responsible for up to two (2) additional weeks of tuition
	ount due for any of the advance two (2) weeks' notice
By signing below, the parties acknowledge they agree to be	bound by all financial terms and conditions contained herein:
Signatures	
Parent/Guardian	Date
Parent/Guardian	Date
Administrator	Date
Date of Admission:	Date Withdrawn:

\*\*If there is an objection to seeking emergency medical care, a statement should be obtained from the parent(s) or guardian(s) that states the objection and the reason for the objection.

### Identity Verification (OFFICE USE ONLY)

If proof of identity is required and a copy is not kept, please fill out the followin	lf	proof	of i	identity	is re	guired	and	a cop	is no	t kept,	please	fill o	out the	followir	າg:
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#### Proof of Child's Identity (OFFICE USE ONLY)

Type of Document	Birth Date	Certificate Number	Date Issued
Place of Birth		Previous Child Care	Date Document Viewed (Initial)

Date of Notification of	Local Law-Enforcement	Agency (when	required proof	of identity	is not
provided):	(Date)				

Proof of the child's identity and age may include a certified copy of the child's birth certificate, birth registration card, notification of birth (hospital, physician or midwife record), passport, copy of the placement agreement or other proof of the child's identity from a child placing agency (foster care and adoption agencies), record from a public school in Virginia, certification by a principal or his designee of a public school in the U. S. that a certified copy of the child's birth record was previously presented or copy of the entrustment agreement conferring temporary legal custody of a child to an independent foster parent. Viewing the child's proof of identity is not necessary when the child attends a public school in Virginia and the center assumes responsibility for the child directly from the school (i.e., after school program) or the center transfers responsibility of the child directly to the school (i.e., before school program). While programs are not required to keep the proof of the child's identity, documentation of viewing this information must be maintained for each child.

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Hours of Operation: 7:00am - 6:00pm

Class Offered:

**Preschool** Full Time Only

(Two Years Old - Five Years Old) **Tuition Includes:** 

- Age Appropriate Curriculum
- Academic Materials
- Spanish Class
- Sign Language Class
- Breakfast
- Lunch
- Afternoon Snacks

**Program Includes:** 

- Structured Classroom Activities
- Reading Program for Pre-K Class
- Math Curriculum
- Arts & Crafts
- Thematic Weekly Lessons
- Drama & Music
- Field Trips
- Spanish
- Sign Language

#### School Age

(Five Years Old - Twelve Years Old)

#### **Tuition Includes:**

- Breakfast
- Snack
- Transportation
- Homework Supervision

#### Program Includes:

- Homework Supervision
- Daily Playground Activities
- Arts & Crafts
- Indoor Centers & Skill Activities
- Field Trips (When School is Closed)

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### **Schedule of Activities**

#### Two's and Three's Class

Time	Activity
7:00am – 8:45am	Greetings/Centers Coloring, Cutting, Painting, Lego's, Blocks, Play Dough, Puzzles, Reading, Writing, Etc
8:45am – 9:10am	Breakfast
9:10am - 9:15am	Bathroom/Book Time
9:15am – 9:45am	Circle Time Sharing, Calendar, Weather, Science, Social Studies, Rhymes, Songs, Exercises, Dancing, Etc.
9:45am – 10:15am	Academics Reading, Math, Writing
10:15am - 10:30am	Worksheet or Academic Activity
10:30am - 10:40am	Bathroom
10:40am - 11:30am	Outside Play Alternate Every Other Day between Up the Hill & Back Yard
11:30am – 11:45am	Story Time/ Preparing for Lunch/Bathroom
11:45am – 12:15pm	Lunch
12:15pm - 12:30pm	Clean Up/Bathroom
12:30pm – 2:30pm	Naptime
2:30pm - 3:00pm	Free Play or Table Activities
3:00pm - 3:30pm	Snack
3:30pm - 3:50pm	Art/Self Expression
3:50pm – 4:00pm	Clean Up/Bathroom/Book Time
4:00pm – 5:00pm	Outside Play
5:00pm - 5:30pm	Story Time/Singing/Dancing
5:30pm - 6:00pm	Free Play/Centers/Goodbyes

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### **Schedule of Activities**

Four's and Pre-K Class

Time	Activity
7:00am – 8:45am	Greetings/Centers Coloring, Cutting, Painting, Lego's, Blocks, Play Dough, Puzzles, Reading, Writing, Etc
8:45am - 9:10am	Breakfast
9:10am - 9:15am	Bathroom/Book Time
9:15am – 9:45am	Circle Time Sharing, Calendar, Weather, Science, Social Studies, Rhymes, Songs, Exercises, Dancing, Etc.
9:45am – 10:15am	Academics Reading, Math, Writing
10:15am - 10:30am	Worksheet or Academic Activity
10:30am - 10:40am	Bathroom
10:40am – 11:30am	Outside Play Alternate Every Other Day between Up the Hill & Back Yard
11:30am – 11:45am	Story Time/ Preparing for Lunch/Bathroom
11:45am – 12:15pm	Lunch
12:15pm – 12:30pm	Clean Up/Bathroom
12:30pm - 2:30pm	Naptime
2:30pm – 3:00pm	Free Play or Table Activities
3:00pm – 3:30pm	Snack
3:30pm – 3:50pm	Art/Self Expression
3:50pm – 4:00pm	Clean Up/Bathroom/Book Time
4:00pm – 5:00pm	Outside Play
5:00pm – 5:30pm	Story Time/Singing/Dancing
5:30pm - 6:00pm	Free Play/Centers/Goodbyes

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#### **Curriculum for Two-Year Old Class**

Content Area	Objectives
Readiness	Colors: Red, Yellow, Blue, Green, Black, White, Pink, Orange, Purple
	Sizes: Big & Small
	Following Simple Verbal Directions
	Matching Same Objects
Letter Readiness	Introduction to Uppercase Letters
	Rote Alphabet
Math Readiness	Introduction to Numbers (1-10)
	Rote Counting (1-10)
	Shapes: Recognize & Identify
Writing Readiness	Staking Objects
	Practice Connecting Dots
	Coloring Inside the Lines
	Cutting with Scissors
	Using Writing Implements Correctly
	Lacing
General Information	Self Concepts (Parts of the Body)
	Family Concepts (Members of the Family)
	Transportation
	Habitat/Shelter
	Food
	Manners (Please, Thank you, Excuse Me, I'm Sorry)
	Musical Instruments
Self Care	Proper Toileting (Practice Pulling down pants & underwear)
	Washing Hands
	Taking Turns & Sharing
Science	Senses
	Weather
	Sound
	Animals
	Seasons
Music & Art	Self-Expression
	Painting
	Drawing
	Rhymes
	Songs
	Drama
Gross Motor	Walking in Line
	Balancing
Oral	Full Name
	School
	Mom & Dad's Name
	Age

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#### **Curriculum for Three-Year Old Class**

Content Area	Objectives
Readiness	Colors: Red, Yellow, Blue, Green, Black, White, Pink, Orange, Purple
	Sizes: Big & Small
	Following Simple Verbal Directions
	Matching Same Objects
Letter Readiness	Recognizing Uppercase Letters
	Rote Alphabet
Math Readiness	Introduction to Numbers (1-10)
	Rote Counting (1-10)
	Shapes: Recognize & Identify
	Understand Concepts of Numbers (1-10)
Writing Readiness	Staking Objects
	Practice Connecting Dots
	Coloring Inside the Lines
	Cutting with Scissors
	Using Writing Implements Correctly
	Lacing
General Information	Self Concepts (Parts of the Body)
	Family Concepts (Members of the Family)
	Transportation
	Habitat/Shelter
	Food
	Manners (Please, Thank you, Excuse Me, I'm Sorry)
	Musical Instruments
	Days of the Week
Self Care	Proper Toileting (Practice Pulling down pants & underwear)
	Washing Hands
	Taking Turns & Sharing
	Putting on Shoes Independently (Assistance with Tying)
	Putting on Coat Independently
Science	Senses
	Weather
	Sound
	Animals
	Seasons
Music & Art	Self-Expression
	Painting
	Drawing
	Rhymes
	Songs
	Drama
Gross Motor	Walking in Line
	Balancing
	Skipping
	Climbing
Oral	Full Name
	School
	Mom & Dad's Name

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### **Curriculum for Four Year Old/Pre-K Class**

Content Area		Objectives
Readiness	Colors: Red, Yellow, Blue, Green, B	lack, White, Pink, Orange, Purple
	Matching: Same & Different	
	Following Directions	
	Sizes: Big & Small	
	More & Less	
	Generalization	
	Rhyming Words	
Reading	Alphabet Recognition: Upper and I	Lowercase
	Read Simple Phonetic Words	
	Word Attack Skills	
	Basic Phonetic Sound	
	Identification: Beginning & Ending	g Consonant Sound
	Basic Vowel Sound	
	Consonant Blend	
	Read: Simple Phrases, Sentences, F	Book
Math	Number Concepts (1-12)	Patterns
	Rote Counting (1-100)	Calculation
	Simple Addition	Graphing
	Number Recognition	Telling Time
	Shapes	Simple Fractions
Writing	Name	•
S	Alphabet (Uppercase)	
	Numbers (1-20)	
General Information	Learn about Self	Food
	Family	Manners
	Animals	Basic Geography
	Community Helpers	Musical Instruments
	Transportation	Days of the Week
	Shelter	·
Self Care	Proper Toileting	Taking Care of Belongings
	Proper Hand washing	Tying Shoelaces
	Dressing Independently	, 6
Science	Human Body	Sound
	Senses	Weather
	Solar System	Seasons
Music & Art	Self-Expression	Rhymes
	Painting	Songs
	Drawing	Drama
Oral	Full Name	
	Telephone Number	
	Home Address	
	Birthday	

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### **Picture and Video Release Form**

I consent to my child's pictuthe Learning Playhouse' webs understand that I may have arremoved at any time.	ite/Facebook page. I
☐ I DO NOT want my child's pi on the Learning Playhouse' we	icture and/or video to appear ebsite.
Child's Name	Parent's Signature

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#### **Blanket Permission Form**

I give my child,	my permission to
participate in Field Trips and otl conducted by the Learning Playl	her extracurricular activities
I understand that I will be notifice location, and a list of things that activity.	ed in advance the time, date, I need to provide for each trip or
If I wish for my child not to partion or activity, I will notify the teach of time.	<del>-</del>
Parent or Guardian Signature	Date
Mom Work Number: Cell Number:	Dad Work Number: Cell Number: