

KIDS' DAY OUT

2019-2020 School Year

A ministry of First Baptist Church

100 S. Hedgecoke - Borger, Texas 79007

806-273-5621

Registration Fees (non-refundable):

- Two-Day Registration (am or full): \$100

Tuition:

- Two-Day Half Day (mornings) Tues & Thurs (9 am-12 noon): \$100/Month
- Two-Day Full Day Tuesday & Thursday (9 am-3 pm): \$150/Month
- Early Bird Drop Off: Come as early as 8:15 am \$10/Month

Drop-In Fees (Upon Availability):

- \$20 for Half Day Morning
- \$10 for Half Day Afternoon
- \$30 for Full Day
- Reservations are required/call the office

Single Day available upon request. Call office for pricing & details.

Welcome to the Kids' Day Out program of First Baptist Church of Borger. Thank you for selecting FBC KDO and for allowing us to be a part of your child's life. To register your child, fill out and turn in the accompanying form. Registration must be paid to hold a spot. This fee is non-refundable and helps cover the expenses of school supplies that the program furnishes. We will need your child's immunization record.

1. Tuition is due the 1st day of each month. Payments may be made online at www.firstborger.com/wee-school, in the church office, or mailed in. Make checks payable to First Baptist Church and put the child's full name on the memo line. If paying with cash, you will receive a receipt. A late fee of \$10.00 will be applied to your account if payment is not received by the 15th day of each month. There will be a \$20.00 service charge for all returned checks or reversed online payments.
2. You must provide a lunch and a drink for the full-day program.
3. General Policies:
 - a) Only enrolled children are permitted in the classroom.
 - b) To withdraw a student, please contact the director and the teacher.
 - c) Refunds are not given for part of a month missed.
 - d) Tuition is due as long as a place is reserved for a child.
4. We follow the BISD calendar for holidays. A schedule is printed in your handbook. School will begin Tuesday, September 3.
5. **Parent Orientation will be on September 5 at 9:10 am in the Chapel. Please plan to attend if possible.**

(Keep this page for your records)

KIDS' DAY OUT REGISTRATION FORM

Please circle all that apply:	Male Female	Tuesday & Thursday Half Day Full Day		Early Bird Dropoff 8:15 am
Child's Full Name (circle name commonly used)				
Child's Address			Street & City	
Date of Birth				
Mother or Guardian's Name		Address (if different from child)		Email Address
Father or Guardian's Name		Address (if different from child)		Email Address
List telephone numbers where parents or guardian may be reached while child will be in class:		Mother's Telephone #	Father's Telephone #	Legal Guardian phone # (not parent)
		Home	Home	Home
		Work	Work	Work
		Cell	Cell	Cell
Are you a church member? If so, where?				
Emergency contacts:				
Other children in the family and their ages:				
Was this program recommended to you by someone? If yes, please give their name.				
AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION: In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize the facility director to take my child to:				
Name of Licensed Physician		Address		Telephone No.
OR TO (name of hospital or clinic)				
I give consent for any and all necessary treatment when my child is in the care of this physician and/or hospital/clinic.				
Signature-Parent or Legal Guardian _____ Date _____				
List any special problems that your child may have (such as allergies, sunburn sensitivity, diet requirements, etc., and any likes or dislikes such as food preferences) that the staff should be aware of:				
Communicable diseases your child has had:				
Serious diseases or accidents your child has had:				
Does your child have any speech, emotional, or behavioral problems?				
<p>FORM CONTINUES ON THE BACK OF THIS PAGE.</p> <p>PLEASE COMPLETE THE OPPOSITE SIDE AND SIGN.</p>				

This page is optional and not required for registration. This information helps our WEE School to qualify for GRANTS. All provided information will be held in confidence and not used for any purposes outside the WEE School. This form will not be associated with your child's information and will be filed separately.

Ethnicity:

- African American
- Caucasian- White
- Hispanic
- Native American
- Other

Household Income:

- Below \$45,000
- \$45,000-\$80,000
- \$80,000 and above