

Afterschool Registration Packet '16-'17



1515 Kooser Road
 San Jose, CA 95118
 Phone: (408) 266-7600

Website: www.BrightStarChristianAcademy.org
 Email: admin@MyBrightStarCA.com
 Facility License# 434413878

Child: _____
DOB: _____ Grade: _____
School : _____
Date enrolled: _____

Welcome!

We are so happy to have you and your wonderful child(ren) at BrightStar Christian Academy! It is a goal of BrightStar Christian Academy (BCA) to create an environment which is both safe and supports positive family values based on Christian principles, beliefs and the Holy Bible. Parents understand the Bible will be taught as God's truth as central to all activities.

BCA Afterschool offers a children's program for children in First through Sixth grade (Kindergarten Afterschool care is operated in conjunction with Preschool Program). We offer a school term program:, Monday through Friday, hours 1:00pm-6:00pm. Week-long and full day Winter and Spring Break Camps offered from 8:00am-6:00pm. Summer Camp may be offered weekly June-July.

Enclosed, please find your child's registration forms. The following is a check-off list to help you complete the requirements of your child's registration. If you have any questions, our office staff is available to assist you!

- **Registration Form & Fee:** The annual Registration Fee is \$50. The Registration Fee is non-refundable and must be paid at registration time.
- **Tuition Fees:** First Month's Tuition must accompany this completed registration packet. Completed registration packets must be returned to the office for review and processing prior to start date.
- **Medical:** Consent for Medical Treatment Form, Child's Preadmission Health History, Child's Emergency Information Form must be completed.
- **Attach a current 2x2 picture of your child to the Emergency Information Form.**
- **Pick Up Authorization Form:** Be sure to obtain signatures and all the necessary information from all the people authorized to pick up your child.
- **Who referred you to BCA? Where did you hear about BCA?** _____

Days/Week	Monday	Tuesday	Wednesday	Thursday	Friday	Tuition/ Month
5-Days M-F	X	X	X	X	X	\$450
Spring/Winter camp Full Day :	\$200/Week	In-Service Full Day:	\$50/Day	Transport Fee:	\$50/ month	

BCA ADMISSIONS & FINANCIAL AGREEMENT

This Admissions and Financial Agreement is applicable to the duration of your child's enrollment here at BrightStar Christian Academy, hereby referred to as BCA, and will remain in effect until the termination of your child's enrollment with BCA. This refers to the school term beginning March 2014 and ending August 2014. Should your child be enrolled in the summer months, be aware that other policies or agreements may be presented; such policies and/or agreements may be applicable to the summer program alone, or serve as a reminder to this existing Admissions and Financial Agreement. It does not, in any way, replace this Admissions and Financial Agreement unless so specified. **AN APPOINTMENT MUST BE MADE WITH THE SCHOOL OFFICE TO HAVE YOUR COMPLETED PACKET REVIEWED (PREFERABLY 7 DAYS) PRIOR TO START DATE TO ALLOW FOR PROCESSING OF YOUR APPLICATION.**

All parents must initial next to the following policies to signify that they have read and understand them.

1. ___ I/we understand that if I/we have any questions or concerns about the Admissions and/or Financial agreement, that it is my responsibility to seek understanding from the BCA office so that I fully comply with all the policies.
2. ___ I/we pledge our fullest cooperation to BCA to employ such discipline (approved by the state) as seems wise and expedient for my/our children, i.e. time outs (no corporal punishment will be allowed). I/we further agree that we will cooperate and discipline in the home as needed.
3. ___ If I cannot pick-up my child, I will arrange for another authorized adult as identified on the enrollment form to sign for and pick-up my child by closing time. No person may pick up my child(ren) unless BCA has the parents' authorized signature on file. Signatures & DL #'s will be matched with the driver's license of the person picking up my child.
4. ___ I/we have read BCA's Parent handbook and I have explained the guidelines to my child. Dress Code and Expectations for Classroom Behavior will be enforced, as stated in the BCA handbook.
5. ___ I/we understand that the Department of Social Services and Community Care Licensing has authority to interview children and inspect records and observe the physical conditions of children, without prior consent. Proper ID will be checked and verified by BCA prior to the interview; staff supervision will be provided.
6. ___ I/we understand that this contract may be terminated at any time if a child is not following standard rules, or if parents fail to adhere to this contract. Dismissal from the program for any reason is at the discretion of the Director.
7. ___ **Registration Fee:** The Annual Registration Fee is \$50, non-refundable and due upon registration.
8. ___ **Monthly Tuition:** Tuition is due by the 3rd of each calendar month. **Payments not received by the third of each month will be charged a late fee of \$20.00.** Late fee must be included in the current month's tuition. **After the 10th of the month the late fee will be increased to 10% of the month's tuition fee.** Parents must meet their financial responsibilities promptly in order to maintain teacher salaries and center expenses. Students may not attend if their tuition is more than 7 days delinquent. Parents must note that tuition is due on time regardless of holiday or closure. Childcare may be discontinued to all delinquent accounts. BCA accepts cash, check, or money order payments only. **All tuition checks and money orders are payable to BrightStar Christian Academy.**
9. ___ **Return Checks Fee:** A \$35 NSF fee will be charged for any returned checks. BCA will not redeposit checks that have been returned due to NSF. **All returned checks must be repaid with cash or money order within 1 week of the incident.** Cash or money orders will be required for regular payments after 2 NSF checks have been returned.
10. ___ **Absence & Sick Leave:** Full tuition payments are due for all absences. All illness absences 10 days or more will receive a 50% reduction for that month's tuition. A stamped physician's note must be turned in to the BCA office for the tuition reduction to take effect.
11. ___ **Vacation:** No vacation credit is granted. Full tuition is due monthly.
12. ___ **Withdrawal:** A **ONE CALENDAR** month WRITTEN and DATED notice is required for withdrawing from the Academy. One month's tuition is due with the notice for withdrawal. See office for withdrawal notice form. (For example: The notice and February tuition is given in JANUARY stating that February will be the last month of attendance.)
13. ___ **Change of Status:** Parents requiring change of care must turn in a change of status form one calendar month prior to change of care. Please note that change of status, extending care, is provided on a space available basis only.
14. ___ **Change of Rates/Care:** BCA will provide a one calendar month notice for any change of tuition and care provided.

15. ___ **Notice of Discontinued Care:** Parents may be required to withdraw their child for a variety of reasons. In such cases BCA will require a one calendar month written (form) notice. Written notice must be received no later than the previous calendar month. Students with interrupted care must pay re-enrollment fee (\$50) upon return and re-enrollment. Your space is not guaranteed.
16. ___ **BCA closes at 6:00 pm.** All programs end at 6:00 pm. A closing late fee of \$2.00 per minute is charged as of 6:01 pm, as of 6:16 the fee is \$3.00 per minute. Once charged, all closing late fees are to be paid directly to the closing staff at the time of pick up. The closing late fee applies per child. This fee also applies to any days the center is closed early due to holidays or other circumstances when parents are previously notified of early closing. In both cases it will be strictly enforced (if necessary, exact time will be determined by searching the net. A Closing Late Fee book must be signed at pickup and at payment time.
17. ___ **Green Campus and Healthy Habits:** All children are required to adhere to the 'no trash' and green policies of the Academy; including bringing their own reusable water bottle.
18. ___ BCA posts pictures and uses pictures for our website (www.BrightStarChristianAcademy.org) and publication materials. I give permission to BCA for publication of my child's picture.
19. ___ In the interest of maintaining a "Green Campus", BCA publishes the Parent Handbook, all monthly calendars/newsletters, and class bulletins via email. Please send me the emails on this address: _____.
20. ___ Should there be a question about the disagreement with school policy or procedures, we will in no case complain to any parent but register concerns with teachers, the Director, or the AECJSJ School Board, following the appropriate chain of command. To insure the resolution of possible disputes of a non-criminal nature, in the spirit of Christian Love, it is agreed that such disputes will be settled in conformity with the Biblical injunctions of Matthew 5:22, 18:15-20, and 1 Corinthians 6:1-8. IF the matter is not resolved after private meetings with the individuals involved, the Director and the Board of Directors, either party may submit the matter to the Bay Area Christian Conciliation Service for mediation, and if necessary, binding arbitration. It is further agreed that a secular court will settle no dispute.

BRIGHTSTAR CHRISTIAN ACADEMY DOES NOT PRACTICE DISCRIMINATION with regard to students on the basis of race, religion, color, creed, sex, or national ethnic origin.

SIGNATURES -I/we have read the conditions of the Admissions Agreement and the Financial Agreement and understand and agree to them, and further agree that we are responsible for all financial obligation incurred relative to this agreement.

BCA is here to serve you. If you have any further questions or require additional information, please feel free to call the office at (408) 266-7600 or email admin@mybrightstarca.com

FATHER'S NAME (please print): _____

SIGNATURE: _____ **DATE:** ____/____/____

MOTHER'S NAME (please print): _____

SIGNATURE: _____ **DATE:** ____/____/____

GUARDIAN'S NAME (please print): _____

SIGNATURE: _____ **DATE:** ____/____/____

DIRECTOR or SITE SUPERVISOR NAME: _____

SIGNATURE: _____ **DATE:** ____/____/____

BCA Office Use Only

Student ID# _____ Date of Receipt of Contract: _____ Registration Payment Type: _____ Check #: _____ Tuition Option Taken: \$ _____

Please attach a 2 x 2 recent picture of your child here.

EMERGENCY INFORMATION

Child's Name:
Birth date: / / Sex: Male Female

FAMILY INFORMATION

Person responsible for child Mother () Father () Both ()

Child's Address:	City:	Zip:
Mother's Name:	Phone (H):	Cell:
Home Address:	City:	Zip:
Email:	Phone (W):	
Employer:	City:	Zip:
Employer Address:		

Father's Name:	Phone (H):	Cell:
Home Address:	City:	Zip:
Email:	Phone (W):	
Employer:	City:	Zip:
Employer Address:		

ADDITIONAL PERSONS TO BE CALLED IN CASE OF AN EMERGENCY

NAME	RELATION	ADDRESS	PHONE #

PHYSICIAN AND DENTIST/INSURANCE INFORMATION

Physician:	Address	Phone:
Dentist:	Address:	Phone:
Health Plan (insurance):		
Subscriber #:		Group Number:
Emergency Hospital Preference:		Phone:
Alternative Action:		

ALLERGIES

SPECIAL NEEDS

Medication		Asthma	
Insect		Seizures	
Food		Diabetes	
Other		Prescribed Medications	
Date of last Tetanus		Other	

As the parent, agency representative, or legal guardian, I hereby give consent to the BrightStar Christian Academy to provide all emergency, dental, or medical care prescribed by a duly licensed physician (M.D.) or dentist (DDS) for my child _____ . This may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

_____/_____/_____
Parent or Guardian's Signature Date

Name of Child:

BCA PICK UP AUTHORIZATION FORM

Only persons listed on this form (other than the parents) may pick up the child above. All information must be completed regarding the people on the list.*

Name:	Signature:
Driver's License #:	Relationship to child:
Address:	Home/Cell #:
City, State, Zip:	Work # :
	Email:

Parents Authorization _____

Date Added ____ / ____ / ____

Name:	Signature
Driver's License #:	Relationship to child:
Address:	Home/Cell # :
City, State, Zip:	Work #:
	Email:

Parents Authorization _____

Date Added ____ / ____ / ____

Name:	Signature
Driver's License #:	Relationship to child:
Address:	Home/Cell # :
City, State, Zip:	Work #:
	Email:

Parents Authorization _____

Date Added ____ / ____ / ____

Name:	Signature
Driver's License #:	Relationship to child:
Address:	Home/Cell # :
City, State, Zip:	Work #:
	Email:

Parents Authorization _____

Date Added ____ / ____ / ____

Name:	Signature
Driver's License #:	Relationship to child:
Address:	Home/Cell # :
City, State, Zip:	Work #:
	Email:

GRIEVANCE POLICY

(PARENT/GUARDIAN COPY- Please keep for your records)

PARENT GRIEVANCE PROCEDURE AND AGREEMENT

These procedures are with regard to this financial agreement or with staff or center administration. Direct, face-to-face resolution is the scriptural means of resolving differences:

1. Should there be a question about or disagreement with school policy / procedures, we will in no case complain to any parent but register concerns with teachers, the Director, or the AECSJ School Board, following the appropriate chain of command.
2. To insure the resolution of possible disputes of a non-criminal nature, in the spirit of Christian Love, it is agreed that such disputes will be settled in conformity with the Biblical injunctions of Matthew 5:22, 18:15-20, and 1 Corinthians 6:1-8.
3. IF the matter is not resolved after private meetings with the individuals involved, the Director and the Board of Directors, either party may submit the matter to the Bay Area Christian Conciliation Service for mediation, and if necessary, binding arbitration. It is further agreed that a secular court will settle no dispute.

Signature of Parent/Guardian

Date Signed

Signature of Staff/Witness

Date Signed

ACKNOWLEDGEMENT of RECEIPT OF BCA PARENT GUIDE BOOK

I have received a copy of the 2014-2015 BCA Parent Guide Book. Please sign your initials stating you have read each section of the BCA Policies and Procedures.

- _____ Vision/Mission/Philosophy Statements
- _____ Admissions Policy
- _____ Drop Off/Pick Up Policy
- _____ Safety Policy
- _____ Emergency Policy
- _____ What to Do When Your Child is Sick
- _____ Dress Code Policy
- _____ Disciplinary Procedures
- _____ Healthy Meal and "no trash" Policy
- _____ Classroom Procedures and Policies
- _____ Legal Policy and Agreements

Child's Name: _____ Male Female

Parent/Guardians Name: _____

Parent/Guardian Signature: _____ Date _____