



St. James's Children's Center

Preparing Young Hearts and Minds for Life

*We Love
We Teach
We Nurture
We Explore*



Phone: (804) 358-9788

Fax: (804) 353-4837

Registration Packet

1205 W. Franklin Street
Richmond, VA 23220



HISTORY AND PHILOSOPHY OF THE PROGRAM

The goal of St. James's Children's Center is to offer children at risk or with developmental disabilities the opportunity to learn and play beside their typically developing peers in an inclusive environment. We are a Virginia Quality Level 4 Quality rated center. We are one of only a handful of early childhood programs throughout the Commonwealth that have achieved this milestone for quality of interactions and instruction.

FROM THE BOARD OF DIRECTORS

St. James's Children's Center is a 501(c)3 nonprofit organization that began as an outreach program of St. James's Episcopal Church. Our mission, "Preparing Young Hearts and Minds for Life" expresses our commitment to creating a quality early childhood program that prepares young children for success in school and in life. We teach and uphold the values of building strong communities and curiosity for learning. Above all, we strive to create an environment in which love and respect are shown for each child as an individual so that they, in turn, learn to respect themselves and others.

ADMISSIONS PROCEDURE

- ❖ Families obtain a registration packet from the front office or on our webpage at www.stjchildrenscenter.org.
- ❖ Registration requirements: Completed registration form, signed family income statement, current immunization record, copy of birth certificate, commitment contract, signed authorization form, and annual \$60 registration fee paid. **Please note that your child is not registered until all paperwork is completed and the registration fee is paid.**

FEES

- ❖ A non-refundable annual fee of \$60.00 is required at the time of registration.
- ❖ Weekly Tuition is \$225.00 per week. During summer months additional activity fee will also be added.
- ❖ Weeks that include a holiday or an emergency closure require full payment.
- ❖ We offer limited scholarships for families who demonstrate a financial need. This is determined on a first-come-first-served basis. To apply for scholarships, you must return your previous year's 1040 tax return with your completed registration packet.
- ❖ Our Center participates in the Child and Adult Care Food Program (CACFP). We offer breakfast, lunch, and two snacks daily to our students regardless of their family's financial ability to pay. We require all families to complete, as part of our registration packet, the CACFP enrollment form.



- ❖ Tuition payments are due on the first day of the school week. A \$10 late fee is added to each week that payments are late. If payment is not brought up to date within the second week, your child will not be allowed to return to the center until your account is current. If you choose to retain your child's slot during the time that your child is out, you will continue to accrue weekly charges until payment is current.
- ❖ **(If your account is delinquent and you need to set up a payment plan to become current, please contact account representative at 804-898-9331 to discuss your options. This will be decided on a case-by-case basis.) In registering your child with our program, please understand that you are paying for a slot that cannot be filled by another child unless you withdraw your child. Therefore, parents pay for every week that the center is open, whether your child attends that week or not.**

OPENING AND CLOSING

- ❖ During inclement weather, St. James will announce school closures and delays on **CHANNEL 6**. We are not able to announce on Channel 12. **Weeks that include emergency closure require full payment.**
- ❖ Operating hours are from 7 a.m. to 5:45 p.m., Monday through Friday. **Children will not be accepted after 9:30am.**
- ❖ There is a **late fee for children picked up after 5:45p.m.** There is a fee of \$5 per minute until the child is picked up. Those fees must be paid in cash and should be paid the following day. You will be required to sign a late form and we will track and withdraw your family from the program if lateness continues to occur.

If your child is receiving services, we ask that:

- You share any available assessment with our staff so that your child's needs are best met.
- A parent/teacher conference will be scheduled to assess what accommodations or modifications your child may need in order to function best in the classroom. It is our hope that the therapists or early childhood developmental specialists working with your child will attend this meeting as well.
- Parents are expected to be involved in the process of setting goals for development, accommodations and continuing progress.
- We encourage professional intervention to be carried out in the natural environment of the classroom so that teachers can learn intervention strategies and carry those strategies out while working with the child.
- When children are moved to a different classroom a transition plan will be discussed with the parents and carried out by the staff. (see transitions in Parent Handbook).



Forms	Have Returned
Completed Registration Packet	
Birth Certificate (Copy)	
Completed Authorization Form (updated yearly)	
Immunization Record (updated yearly)	
Completed School Physical Form (updated yearly)	
Completed Allergy Action Plan (if allergy is present and must be completed by physician)	
1040 Tax Return (if applying for scholarship)	

Please make sure the supporting documentation accompanies your completed registration packet.



Thank You,

Bridgitte Laidley
Program Manager
1205 W Franklin Street
Richmond, VA 23220
(804) 358-9788 ext 338
blaidley@stjchildrenscenter.org



Supply List

- 4 Boxes of Tissues
- 4 Boxes of baby wipes
- 5 Glue Sticks
- 3 Bottles of Hand Sanitizer
- 1 Box of Large Crayons
- 1 Box of Large Markers
- 3 Primary (Fat) pencils
- 1 pair of Fiskars scissors
- 2 One Gallon Ziploc Bags
- One Cushioned Rest Mat (yoga mats are not permitted)
- Crib sheet for rest mat
- A blanket for rest time
- One Black and White Composition Book

We may be asking families to help us replenish items in January. Feel free to donate additional items at any time!

Thank You!!



Online Payment Instructions

St. James's Children's Center is pleased to offer **MyProcure**, a free online portal for you to access account information and easily pay tuition. MyProcure is safe, secure and created with your convenience in mind.

Log in today!

1. Go to MyProcure.com.
2. Enter your email address (the email you have on file with St. James Children's Center) and choose **Go**.
3. A confirmation code will immediately be sent to the email you have on file at the school. Enter the confirmation code sent to your email, choose a password, and press **Go**.
4. Then use the **Pay** button to make a payment with your card.



Please read and initial each statement.

I authorize () and/or do not authorize () the Children's Center to obtain from child's physician any information concerning my child if needed in assessing his/her developmental functioning. If developmental need is present or observed, we will work with parents/caregivers to determine and implement developmentally appropriate care for continued growth and development.

I authorize () or do not authorize () the Children's Center to obtain all necessary emergency care for my child if needed.

If allergies are present, please return completed allergy action plan completed by physician. ()

() In the event of an emergency or illness, I will make arrangements for my child to be picked up from the Center **within one hour** after being notified. I will also notify the Center within 24 hours if my child and/or anyone in my family have a communicable disease and when the physician says that they will be released to return to school.

() If your child is sent home with a fever or diarrhea, they must be out of the Center for 24 hours and symptom free for 24 hours prior to returning to school.

I authorize () and/or do not authorize () my child to participate in all Center sponsored field trips and be transported for such activities. If you opt out of fieldtrip participation, we will not accept your child for care on fieldtrip days.

() Weeks that include a holiday or an emergency closure require full payment.

I authorize () and/or do not authorize () the Center to take and use photographs of my child for publicity and advertising purposes. Your child's photograph will still appear on the classroom Shutterfly page because it viewed by invitation only and not for public consumption.

I acknowledge that my child may participate in selected professional student experiences (interns from the local colleges), as supervised by Center's staff. ()

I acknowledge the Children's Center will make every effort to support the needs of my child. The Center reserves the right to terminate my childcare agreement without prior notice if my child/ren or family has difficulty adjusting to our program or adhering to Center rules and policies for health and safety. The Children's Center makes an individualized assessment about whether it can meet the needs of a child without fundamentally altering its program. The Center is not required to accept children who would pose a direct threat or whose presence or necessary care would fundamentally alter the nature of the childcare program. ()

I acknowledge the expectation of attendance and participation in Children's Center parent-teacher conferences and completing assessments to assist in setting and updating goals for development. ()

PARENTS/GUARDIANS' AUTHORIZATION:

Signature/

Date



Income Verification

In order to keep your tuition costs as low as possible, each year the Children's Center raises over \$450,000 from the community. Many foundations and corporate donors require income data for student families. To provide this information, all families are required to complete this **confidential** income statement at the time of your child's enrollment.

Number of people in my family/household _____

My yearly family income is: (check one)

____ Below \$15,000

____ \$15,000 to \$20,000

____ \$20,000 to \$25,000

____ \$25,000 to \$30,000

____ \$30,000 to \$35,000

____ \$35,000 to \$40,000

____ \$40,000 to \$45,000

____ \$45,000 to \$50,000

____ \$50,000 to \$55,000

____ \$55,000 to \$60,000

____ \$60,000 to \$65,000

____ \$65,000 to \$70,000

____ \$70,000 to \$75,000

____ \$75,000 to \$80,000

____ \$80,000 to \$85,000

____ Above \$85,000

Please print child's name: _____ Please print your name: _____

Parents Signature: _____ Date: _____

**Your child's registration at St. James's Children's Center will not be complete until all forms are completed and returned. Those wishing to apply for tuition assistance must submit a copy of most recent IRS tax filing form (Form 1040)*



Date of Registration _____ Date enrolled _____	Tod 1 ___ Todd 2 ___ PreSch 1 ___ PreSch 2 ___ PreK ___ (Pre-k must be 4 by September 30 th)	State: _____ Issue Date: _____ Verified by: _____ Date Verified: _____ BC# _____
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Child's Name	Nickname	Date of Birth	Sex
Street Address, City, Zip			Home Phone
Chronic Physical Problems/Pertinent Developmental Information/Special Accommodations Needed			
If Child Attends this Center and Another School/Program, Give Name of School/Program			

PARENT(S)/GUARDIAN(S)

Mother	Place Employed	Business Phone
Street Address, City, Zip		Home Phone
Email Address		County
Father	Place Employed	Business Phone
Street Address, City, Zip		Home Phone
Email Address		County
Person (s) or Agency Having Legal Custody of Child		Business Phone
Home/Business Address		Home Phone

EMERGENCY INFORMATION

Allergies or Intolerance to Food, Medication, etc., and Action to Take in an Emergency		
Name of Child's Physician		Physician's phone number
Two People to Contact if Parent(s) Cannot Be Reached	Address (Required)	Phone (Required)
1.	1.	1.
2.	2.	2.
Person(s) Authorized To Pick Up Child		
Person(s) NOT Authorized To Pick Up Child*		



- Appropriate paperwork such as custody papers shall be attached if a parent is not allowed to pick up the child.
- The Children's Center will make every effort to support your family. We reserve the right to terminate our agreement if your child/ren or family have difficulty adjusting to our program. The Center is not required to accept or continue to serve children who would pose a direct threat or whose presence or necessary care would fundamentally alter the nature of the child care program. We reserve the right to terminate this contract without prior notice.
- NOTE: Section 22.1-4.3 of the Code of Virginia states unless a court order has been issued to the contrary, other non-custodial parent of a student enrolled in a public school or day center must be included, upon the request of such non-custodial parent, as an emergency contact for events occurring during school or day care activities. The Children's Center agrees to notify the parent(s)/guardian(s) whenever the child becomes ill and the parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by the center.
- The parent(s)/guardian(s) authorize the child day center to obtain immediate medical care if any emergency occurs when the parent(s)/guardian(s) cannot be located immediately. **
- The parent(s)/guardians agree to inform the center within 24 hours or the next business day after his child or any member of the immediate household has developed a reportable communicable disease, as defined by the State Board of Health, except for life threatening diseases, which must be reported immediately.

SIGNATURES

Parent(s) or Guardian(s)
Date

Administrator of Center
Date

Date Child Entered Care: _____ Date Left Care: _____

** 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.

OFFICE USE ONLY IDENTITY VERIFICATION

If proof of identity is required and a copy is not kept, please fill out the following.

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. Section 63.2-1809 of the Code of Virginia states that the proof of identity, if reproduced or retained by the child day program or both, shall be destroyed upon the conclusion of the requisite period of retention. The procedures for the disposal, physical destruction or other disposition of the proof of identity containing social security numbers shall include all reasonable steps to destroy such documents by (i) shredding, (ii) erasing, or (iii) otherwise modifying the social security numbers in those records to make them unreadable or indecipherable by any means.