



Enrollment Information Fall 2024

PLEASE BE SURE TO FILL IN EACH AREA OR PUT N/A

Name	Date of Birth	M or F
Address	City	Zip Code
Home Phone	Email	
Parent/Guardian Name	Place of Employment	Work/ Cell Number
Parent/Guardian Name	Place of Employment	Work/Cell Number
Person, Address and Phone number to call in case of Emergency if parent cannot be reached:		
I authorize ECP to allow my child to leave the program ONLY with the following persons, along with the persons listed above: / / /		
Do you have a church home? Y or N If so, where		

Authorization for Emergency Medical Attention		
If I cannot be reached to plan for emergency medical care, I authorize the person in charge to transport my child to: (You will need to fill out this information completely)		
Name of Physician or Hospital:	Address:	Phone:
My Child is allergic to the following medication: _____		

I give consent to Walnut Ridge Baptist Church and Ridge Kids Early Childhood to secure all necessary emergency medical care for my child.

Parent or Guardian Signature: _____ Date _____

Parent Name: _____ Driver's License Number: _____

Notary of Public: _____ Date: _____

Notary Seal: _____

Child's Name: _____ Birthday: _____

I give Ridge Kids my permission to take snap shots and / or videos during the school year (2024-2025) yes, or no?

My child may participate in water table play yes, or no?

My child does NOT have food allergies however I choose for my child NOT to have the following items at ECP.

My child has allergies that ECP needs to be aware of yes, or no?
If yes, there is an attached form that needs to be signed by you and the physician. Only if it's a FOOD allergy.

My child has medical issues that the ECP needs to be aware of yes, or no?
If yes, please explain _____

Other than food, my child is allergic to the following: _____

I give Ridge Kids my permission to put my child's picture on Ridge Kids social media pages yes, or no?

I submit that all information provided on this form is correct and to the best of my knowledge. If any of the information becomes incorrect, I understand it is my responsibility to provide ECP with correct information in writing as soon as possible. I understand that the completion of this form and payment of the registration fee guarantees placement of my child in ECP. I also understand that the registration /supply fee is non – refundable.

Parent/Guardian Signature

Date

Days Enrolled: circle one **Tues/Weds/ Thurs** **Mon/Tues/Wed/Thurs**

Ridge Kids Office Use Only
Age Group: _____ (all Three-year olds must be potty trained)
Registration Fee: _____ Supply Fee _____
Date of Admission _____



Doctor Statement

Name of Child: _____ Date of Birth _____

Admission Requirements: The following must be presented when your child is admitted to Ridge Kids for Admission in the Fall 2024

Doctor's Statement: I have examined the above-named child and find that he/she is physically able to take part in the Early Childhood Program

Physician's Signature

Date

Please attach a copy of your child's updated immunization records

Hearing and Vision Screening: State requires for all students who are 4 years old by September 1, 2023.

Hearing Ear 1000HZ 2000HZ 4000HZ
Right

Left

Pass/Rescreen/Refer

Screened by: _____

Vision R20/____ L20/____

Glasses R20/____ L20/____

Pass/Rescreen/Refer

Screened by: _____

Signature: Physician or Health Personnel _____ Date _____

Signature: Staff making handwritten copy of record: _____ Date _____

REGISTRATION FALL 2024

If you desire to enroll your child for the fall of 2024, please return the completed forms. **Do not leave any areas blank and include your \$125.00 registration fee and turn into the Ridge Kids ECP office.** Forms will need to be notarized and that can be done in the office, please bring your I.D.

To be placed in a three-year-old class, your child needs to be **completely** potty trained. To be placed in a One-year-old classroom your child must be 12 months **AND** walking independently.

REGISTRATION FEE:

\$125.00 (Non-refundable, due at time of registration)

SUPPLY FEE:

\$125.00 For all ages (Due with September and January's tuition)

TUITION RATES:

1, 2 and 3-Year-olds

Number of Days	Price
3 days a week	\$335.00 per month
4 days a week	\$435.00 per month

4 and 5-Year Olds

Number of Days	Price
4 days a week	\$435.00 per month

Things to Know:

Our 3-Day classes are Tuesday through Thursday from 9:00 to 2:30

Our 4-day classes are Monday through Thursday from 9:00 to 2:30

Your child will need these items everyday:

(Please label all items)

- *Snack
- *Lunch
- *Water Bottle
- *Rest mat
- *Backpack