

Class Days - Monday Tuesday Wednesday 9:30 – noon 9:30 – 2:00  
(Parents, please circle that which applies to your child)

**BETHANY LEARNING CENTER - ENROLLMENT FORM**

2010-2011 school year

Child's Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Today's date \_\_\_\_\_  
Name child goes by \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_

Street \_\_\_\_\_ City / State \_\_\_\_\_ zip \_\_\_\_\_  
Housing Addition \_\_\_\_\_ Nearest major intersection \_\_\_\_\_

Father's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Father's Business \_\_\_\_\_ SSN \_\_\_\_\_ Work Phone \_\_\_\_\_  
E-Mail \_\_\_\_\_ Cell/other Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Mother's Business \_\_\_\_\_ SSN \_\_\_\_\_ Work Phone \_\_\_\_\_  
E-Mail address \_\_\_\_\_ Cell/other Phone \_\_\_\_\_

Brothers and Sisters (please indicate if they DO NOT live with the student)

\_\_\_\_\_ DOB \_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_ DOB \_\_\_\_\_ DOB \_\_\_\_\_

Please list anyone else that lives with the child \_\_\_\_\_

Pets \_\_\_\_\_ Fears \_\_\_\_\_  
Food Allergies \_\_\_\_\_

In order to be supportive to the students needs please list any other information that may be of assistance to our staff (i.e. recent death in family, new baby, recent divorce, etc.).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have a church affiliation? If yes, where? \_\_\_\_\_

Who is authorized to pick up your child? **Please be specific.**

	Name	Relationship to child	Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

How did you learn of Bethany Learning Center? \_\_\_\_\_

\*A custodial parent/guardian must present the proper legal documents to the director to prevent a non-custodial parent from having access to the student.  
\*A current immunization record must be filed in preschool office before enrollment is complete. Student may NOT attend any class until immunizations are current according to the vaccine requirements in the Parent Handbook.  
\*Changes made after initial date of enrollment are assessed a \$10 fee. See Financial Agreement.

**Bethany Learning Center - Emergency Form**

Child's Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Whom shall we call in case of emergency and parents cannot be reached?

- 1. Name \_\_\_\_\_ phone \_\_\_\_\_  
Relationship to child \_\_\_\_\_ cell / other phone \_\_\_\_\_
- 2. Name \_\_\_\_\_ phone \_\_\_\_\_  
Relationship to child \_\_\_\_\_ cell / other phone \_\_\_\_\_

**In case of emergency**, I do hereby authorize that my child \_\_\_\_\_ be transported by ambulance if necessary, at my expense, to the emergency room after sufficient efforts have been made to contact the parents. Authorization is given to render any medical, dental, or diagnostic treatment necessary, at my expense. This consent shall remain in effect during the 2010-2011 school year.

Date \_\_\_\_\_ Signature of parent / legal guardian \_\_\_\_\_

Minor's physician \_\_\_\_\_ phone \_\_\_\_\_

Minor's allergies \_\_\_\_\_

Minor's existing medical conditions and medications: \_\_\_\_\_

**HEALTH AND DEVELOPMENTAL INFORMATION**

- 1. Is this child taking any medication regularly? What and why? \_\_\_\_\_  
\_\_\_\_\_
- 2. What hearing, vision, speech, or physical concerns do you have for your child?  
\_\_\_\_\_
- 3. What developmental delays/concerns do you have? \_\_\_\_\_  
\_\_\_\_\_
- 4. Is your child toilet trained? \_\_\_\_\_ Are you currently in the process of toilet training your child? \_\_\_\_\_ If yes, when did you begin? \_\_\_\_\_
- 5. Is there special vocabulary we should know that pertains to the child's needs?  
\_\_\_\_\_
- 6. Has your child ever been assessed by public schools? If yes, please explain the findings of the school. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 7. Additional comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Bethany Learning Center – Financial Agreement

### Policies:

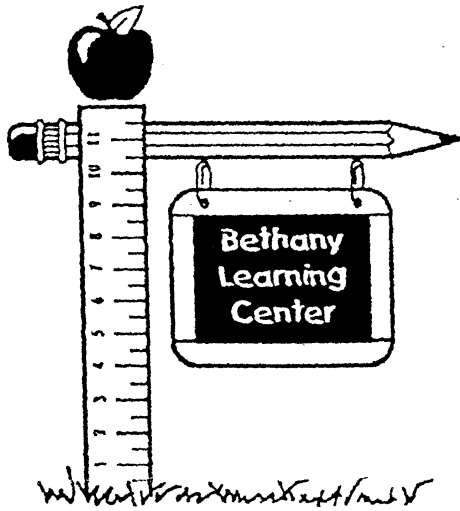
1. I agree to comply with the rules and regulations of Bethany Learning Center regarding fees, withdrawals, health, parking and other items as specified in the Parent's Handbook available at the preschool and understand that my child's space may be terminated if I disregard the rules and regulations of BLC.
2. The registration fee, immunization record and completed enrollment forms conclude the registration process and assures your space in the class until August 1. The fee is NON-REFUNDABLE. Changes in your enrollment (days or times) made after initial enrollment may be made for a \$10 fee for each change.
3. The first monthly tuition payment is due on **August 1, 2010** and considered late after August 5. That payment will be applied to **May, 2011**. Tuition is due on the 1<sup>st</sup> of every month thereafter and subject to a 10% late fee after the 5<sup>th</sup> of each month. Tuition may be paid in the office during school hours or by mail. Upon your request other payment arrangements may be made with approval of BLC administration.
4. There is NO reduction in tuition for absences (for ANY reason) or cancellation of classes due to inclement weather. The total number of school days for the year has been divided into nine equal payments.
5. Once tuition payments are started there are NO REFUNDS. A one month notice (written) or one month's tuition is payable upon withdrawal from school before the school year ends. A one month notice will allow BLC to apply the prepaid May tuition to the last month you are here provided your last month is before March 1. **Withdrawals on or after March 1 forfeits the May tuition regardless of prior notice.**

### FEES:

1. A fee of 10 % of your monthly payment will be assessed to payments not received in the preschool office by the close of school on the 5<sup>th</sup> of each month or the nearest preceding school day should the 5<sup>th</sup> fall on a day that school is not in session. Tuition will be accepted any day classes are in session or by mail. **Tuition payments cannot be accepted in the Bethany Church office at any time.**
2. A late fee will be due upon pickup of your child if he/she is in the office after dismissal. The student will be brought to the office 5 minutes past dismissal time. The rate of assessment is \$1 for every 5 minutes or portion thereof. On the third late pickup the assessment will double to \$2 for every 5 minutes or portion thereof. The student may not return to class until the late fee is paid.
3. A fee of \$20 will be assessed for returned checks.
4. Enrollment for the NEXT school year will not be accepted until all fees and assessments have been paid.  
*Failure to pay a fee by the next month's tuition may result in dismissal*

***I have read and agree to abide by the above stated policies.***

Date \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_



100 N. Olive  
Broken Arrow, OK 74012  
252-1873  
FAX 252-5586

## 4's

While we recognize that each child may not master each concept or skill. The staff of Bethany Learning Center will present and encourage the following and make assessment for the spring parent / teacher conferences for the four year old classes:

Answer yes or no

### LANGUAGE ARTS CONCEPTS:

1. Is able to confidently state:

Name

Age

Birthday

Address

Telephone

Parent's Names

2. Recognizes and prints first name

3. Identifies the following colors:

red

blue

black

orange

green

brown

purple

yellow

4. Recognizes and names upper and lower case letters out of context

5. Can recall or dictate a story

6. Hear and repeat simple 8 - 10 word sentence

7. Sequencing: Tells what happens first, next and last regarding an event or activity.

8. Demonstrates basic concept of complete sentences

9. Can reproduce a three object pattern from memory

10. Trace and copy letters, shapes, and numbers

11. Identifies initial consonant sounds

12. Can say simple rhymes and identify the rhyming words

MATH CONCEPTS: Answer yes or no

1. Identify and draw an identifiable square, triangle, circle, and rectangle
2. Demonstrates understanding of spatial relationships by correctly counting objects
3. Count orally 1 - 20
4. Arrange at least three objects in graduated order (big, bigger, biggest)
5. Recall and reproduce sample patterns on paper
6. Identifies and names relative sizes and lengths (bigger/smaller, longer/shorter, etc.)
7. Identifies and names numerals 1 - 10 in and out of sequence
8. Recites the days of the week

SCIENCE CONCEPTS: Answer yes or no

1. Describe the characteristics of each of the five senses
2. Names the four seasons and can describe the characteristics of each
3. Observe and identify characteristics of weather
4. Classify animals by air, land, and water
5. Describe a complete plant cycle (seed, sprout, bloom, fruit/flower)
6. Describe simple conservation measures

SOCIAL STUDIES: Answer yes or no

1. Can identify everyone that lives in his/her home
2. Shows an understanding of community and can identify that we are in Broken Arrow, OK.
3. Identifies common occupations of the community (fire fighter, police, doctor, etc.)
4. Recognizes that children in the community and around the world have needs in common and are also unique in languages, food, clothing and customs
5. Attempts to recite the Pledge of Allegiance and can sing 2 or more songs about America
6. Understands that we live in the United States of America
7. Recognizes the American Flag

PHYSICAL DEVELOPMENT: Answer yes or no

Large Motor Skills:

Demonstrates the ability to:

- walk
- run
- march
- hop
- jump
- crawl
- bend
- turn
- bounce and catch a ball
- climb
- use the playground equipment without assistance

#### Small Motor Skills:

1. Uses crayons/markers with controls
2. Uses scissors with control
3. Uses glue with control
4. Uses two finger and thumb grasp when using writing tools
5. Tries zipping, snapping, and buttoning
6. Uses paint and paintbrush with control

#### PERSONAL AND SOCIAL BEHAVIOR:

1. Expresses feelings through words rather than actions (biting, pinching, hitting, etc.)
2. Takes care of materials
3. Can stay focused on a task up to 15 minutes
4. Consistently completes a task
5. Works and plays cooperatively with others as well as independently
6. Makes decisions and choices independently
7. Seeks adult assistance when necessary
8. Persists to complete problem solving activities (puzzles, lotto, matching games, etc.)
9. Shows respect of teacher as authority in the classroom
10. Can independently take care of bathroom needs
11. Recognizes personal belongings
12. Separates easily from parent and shows feelings of security in the classroom
13. Demonstrates listening skills and ability to follow two step directions

#### SPIRITUAL CONCEPTS:

1. Recognizes that God and Jesus love and care for people
2. Recognizes that God hears us when we pray
3. Recognizes that God made everything in the natural world
4. Understands that God is always with us
5. Understands that God can do things that people cannot do
6. Recognizes the Bible as God's Words to us.
7. Knows that church is a place to learn about God; that He wants us to love Him and love each other
8. Can recall the Bible stories of Daniel in the Lion's Den, David and Goliath, Joseph and the Coat of Many Colors, the Birth of Christ, and The Death and Resurrection of Christ
9. Can sing 5 or more songs about God and His love



100 N. Olive

## Bethany Learning Center

Broken Arrow, OK 74012

252-1873 (FAX252-5586)

2010-2011 preschool classes for 4's  
(children born between September 2, 2005 and September 1, 2006)

### **Students MUST be toilet trained for 4's classes**

6 students minimum and 12 students maximum to one teacher

**OR** 20 students to 2 teachers.

1. \_\_\_ Monday, Tuesday and Wednesday \* 9:30 – noon \$115/month  
or 11:30 – 2:00
2. \_\_\_ Monday, Tuesday and Wednesday 9:30 – 2:00 \$165/month
3. \_\_\_ Monday extension to 2:00 \*\* \$35/month
4. \_\_\_ Tuesday extension to 2:00\*\* \$35/month
5. \_\_\_ Wednesday extension to 2:00 \*\* \$35/month

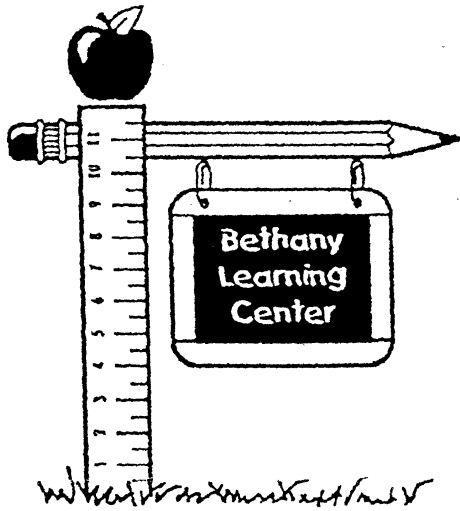
\*May add until 2:00 for \$5.00 per hour

\*\*Must initially choose option 1 before adding option 3, 4, or 5.

**Bethany will follow Union Public School's calendar.**

Enrollment will be accepted from March 22, 2010 – March 1, 2011 as space is available.  
Enrollment is complete with \$60 paid nonrefundable registration fee, current immunization record  
and completed enrollment forms.

The week previous to Labor Day  
the students will have the  
opportunity to meet their teacher  
when she visits the home AND  
Open House, on Wednesday, 9:30 – 10:30.



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## SUPPLY LIST FOR 4's

- |                      |  |
|----------------------|--|
| 1 pair               | <i>Fiskars</i> blunt end child scissors                            |
| 2 sets of<br>8 count | Primary Color <i>Crayola</i> Brand Washable Markers (the fat ones) |
| 1 trays              | <i>Crayola</i> Watercolor Paints                                   |
| 24 count             | <i>Crayola</i> Crayons   |
| 4 count              | #2 pencils (regular size)  |
| 2 count              | Dry Erase Markers (black & skinny)                                 |
| 6 count              | glue sticks  |
| 1 bottle             | Elmer's glue   |
| 1                    | small pencil box (approx. 6x9 inches)                              |
| 1                    | backpack (to be brought to and from school daily)                  |
| 1 count              | Clorox wipes   |
| 1 box                | Kleenex tissues  |

Please label all items with child's name.