## Bridgeway Academy

(251) 345-4444 Saraland Campus (251) 586-8024 Satsuma Campus bridgewayacademy@aol.com

Parents and Guardians.

We are excited about Bridgeway Academy's **Registration** for **2020-2021 school year**. Our staff anticipates the enrollment at BA to be full as we have maintained a full enrollment throughout the school year and the waiting list continues to grow. Be sure to secure your child's space early.

The BA Parent Student Handbook and Parent Guide is available on our website. The handbook is filled with important information and serves as a tool to answer many frequently asked questions. Please take time to read carefully prior to securing your child's enrollment at Bridgeway Academy.

At this time, we will continue to participate in the Alabama Child Nutrition Program which provides breakfast, lunch and snack to our students beginning at age 1. However, please understand participation in this program will depend on the results of a yearly audit which at that time, BA may choose to discontinue participation and students will be required to bring a lunch or purchase one from school. Audits are unannounced so we do not have a date for this decision.

As always, we thank you for your continued support and for trusting us with your child each day. Please let us know if there is anything we can assist you with now or in the future.

Sincerely,

Missy Nolen

Missy Nolen

Bridgeway Academy, Owner and Business Manager

Bridgeway Academy
Connecting Today's Lessons
with Tomorrow's Leaders



## Effective August 1. 2020:

Daycare, Preschool & School-Age programs are YEAR AROUND programs.

## Yearly fees are as follows:

Daycare = \$200 due yearly on/before May 1st

Preschool = \$200 due yearly on/before March 1st (Registration Fee & Building Fee)

\$200 due yearly on/before June 1st (Program Fee)

School-Age = \$115 due yearly on/before June 1st (Total Cost of Summer Field Trips)

\$100 due yearly on/before August 1st (Registration Fee & Activity Fee)

NOTE: There are no fees for summer as we are a year around program.

Parents who choose to withdraw students will be required to give a two week notice and the child's space will be available for new students to enroll at BA. Students who have withdrawn will be able to re-enroll if space is available.

A re-entry fee of \$200 will be required at the time of enrollment.

#### PAYMENT SCHEDULE

### **Davcare**

6 wks - 12 months

\$560 Monthly Due on the 1st (\$280) and 15th (\$280) of each month

#### 12-24 months

Due on the 1st (\$270) and 15th (\$270) of each month \$540 Monthly

#### Preschool

August - May

\$345 Monthly Academic Tuition Due on the 1st of each month Due on the 15th of each month

\$160 Monthly After School Care Tuition

(if needed)

## School-Age

August - May

Due on the 1st (\$110) and 15th (\$110) of each month \$220 Monthly

## Preschool & School Age

## June-July

\$500 Monthly Due on the 1st (\$250) and 15th (\$250) of each month \*Parents may choose for their pre-school child to attend part-time for June and July.

NOTE: Tuition is a MONTHLY tuition. Tuition is not prorated for absences, school breaks, holidays or days school is closed due to inclement weather, teacher trainings or an outbreak of any type of illness.

<b>EMAIL ADDRESS</b>
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## Child's preadmission record

DHR-CDC-739

## CHILD'S PREADMISSION RECORD

Child's Name:		Name child is known by:				
Child's birthdate:		Child's home address:				
Name(s) of parent(s)/goard	ism(S):	Home telephone number: ( )				
Address of parent(s)/guard	an(s):					
Mother's employer.		Father's employer:				
Employer's address:		Employer's address:				
Employer's telephone man	ber: ( )	Employer's telephone must	er.( )			
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## 2020-2021 **Waiver**

#### **HEATH HISTORY**

The health history form is complete and accurate. My child has permission to engage in all activities unless otherwise specified in writing. I understand the Bridgeway Academy assumes no responsibility for injuries or illnesses which my child may sustain as a result of his/her participation in programs, field trips, the use of any equipment, exercises or other activities. I expressly acknowledge that I assume the risk for any and all injuries and all illnesses which may result from his/her participation in any Bridgeway Academy program or activity. I acknowledge that my child has been medically cleared to attend school.

I also understand that there is a risk of injury while participating in physical activity by my child. I agree to hold harmless Bridgeway Academy, LLC, its staff and volunteers for accidents or injuries arising out of his/her participation in any program and/or activity.

In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by Bridgeway Academy to secure and administer treatment including but not limited to, hospitalization of my child. I understand that no accident or medical insurance is provided for students attending Bridgeway Academy.

#### **PHOTO RELEASE**

I give Bridgeway Academy, LLC, permission, without limitation or obligation, to use photographs, film footage or tape recordings which may include my child's image or voice for purposes of promoting or interpreting Bridgeway Academy's programs and release Bridgeway Academy, LLC, from any claim of liability to that use.

#### PAYMENT AUTHORIZATION

I understand Bridgeway Academy will only accept checks over \$100 and a \$50 fee will be applied for all "returned" checks for non-sufficient funds.

I accept sole responsibility for notifying Bridgeway Academy if my address, phone number or banking information changes.

#### **COLLECTIONS**

I understand that any unpaid balances at the time of withdrawal will be sent to collections and I will be responsible for paying the collection fees.

#### ACCEPTANCE/RELEASE

I (we) acknowledge the conditions as stated, for myself and on behalf of any minors listed, I (we) hereby release Bridgeway Academy, LLC, its agents, volunteers and employees from any and all claims for injury, illness, death, loss or damage that are not directly resulting from Bridgeway Academy's negligence which may result from participation in school programs and/or activities.

#### CODE OF CONDUCT

Bridgeway Academy reserves the right to withdraw a student when a person's behavior or language is in conflict with the welfare of other students, parents, staff, or in conflict with the Bridgeway Academy values.

Parent or Guardian	Date
Witness	- Date



Name of Student
Date
Does your child have any <u>FOOD</u> allergies?  If yes, please list below and include any specific directions we may need and a doctor's note must accompany this form.
2. Are there any other allergies (inside or outside) we need to be aware of? If yes, please list below and include any specific directions we may need and a doctor's note must accompany this form.
3. Are there any special health conditions we need to be aware of? If yes, please list below.
4. Are there any "special needs" developmentally that we need to be aware of?  If yes, please list or describe them below.
Please list the names and phone numbers of any person(s) that your child may be released to:

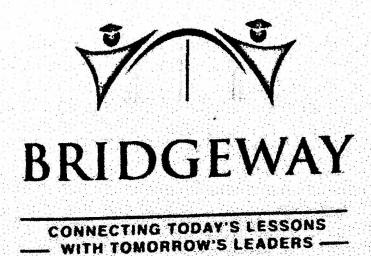


## Enrollment Form for Alabama Child and Adult Care Food Program 2020-2021

Child's FULL legal Name
*This must match the name on the CACFP Eligibility Form and birth certificate.
Child's Date of Birth
*This must match the name on the CACFP Eligibility Form.
Name of Parent/Guardian
*Name must match the parent or guardian on the CACFP Eligibility Form.
Signature of Parent/Guardian
*Signature must match the name on the CACFP Eligibility Form.
***This information will be completed by BA Staff.
Usual Times of Attendance
*If times change during the year, please make the change, initial and write the date of change.
Normal Meals Served: Breakfast Lunch Snack Please circle all that apply. *If meals change during the year, please make the change, initial and write the date of change.
First Day of Attendance in 2020-2021

# This form must be updated annually. (CACFP Policy)

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## Parent/Guardian Signature Page

As a condition of your student's enrollment at Bridgeway Academy, the parent and student are committed to adhere to the rules, policies, and procedures of the school, as stated in the School Handbook. I have read and understand the contents of this handbook. I have explained the areas of information which is appropriate for my student. Please also familiarize your student with the sections that pertain to students. The school reserves the right to modify or amend this handbook at any time.

I hereby acknowledge that I have read the School Handbook and agree to the commitment set forth above.

Parent/ Guardian Name (Printed & Signature)	
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