

# The Learning Lighthouse Preschool



Parent Handbook  
2008-2009

# PARENT HANDBOOK

The Learning Lighthouse Preschool  
504 N Pennsylvania Street  
816-296-3210

## PRESCHOOL MISSION STATEMENT

“Our mission is to provide a quality preschool within a Christian environment. Our preschool will promote positive self-esteem and enable the children to grow personally, socially, physically, mentally, spiritually, and emotionally.”

### Hours

8:15-11:15 A.M.	Monday, Wednesday, Friday	4-5 year olds
12:00-3:00 P.M.	Monday, Wednesday, Friday	4-5 year olds
9:00-11:30 A.M.	Tuesday, Thursday	3-4 year olds

### Staff

Director Julie Titus  
Teachers Julie Titus, Missi Jones, Deanna Gilliam

### Board of Directors

Homer Davidson  
Lawson United Methodist Church 296-7793  
Pam Bessmer, President  
Roslyn Ashcraft, Treasurer  
Nancy Fullerton, Secretary  
Gail Ryther, Member  
Michelle Smith, Member  
Becky Hartman, Member

## **PHILOSOPHY**

The program is designed to provide a quality educational experience for all children enrolled. The preschool recognizes that the family and the home are the first and most significant influence in a child's life. Therefore, we strive to strengthen and complement these influences by giving each child the freedom to develop to his/her capacity in a warm, caring, and Christian educational environment. We provide periods of self-selected play and social interaction as well as planned group activities. We believe that creativity and free expression are enhanced through self-control and respect for the rights of others. We emphasize mutual respect among the children and teachers.

The Learning Lighthouse Preschool accepts all children regardless of race, religion, national origin, or sex. The needs of handicapped children will be considered on a case-by-case basis to determine whether our facilities and staff are capable of meeting the needs of the individual child.

## **STATEMENT OF PURPOSE**

The purpose of the preschool program is to enable each child to:

- A) Develop and maintain a positive feeling about himself/herself,
- B) Use all senses to create, explore, and learn,
- C) Expand his/her awareness of the world around him/her,
- D) Develop language through listening, speaking, and dramatic play
- E) Develop physical growth through motor activities,
- F) Develop respect for the rights and property of others,
- G) Develop ability to express feelings in appropriate ways, both verbal and nonverbal.

## **OWNERSHIP**

The Learning Lighthouse Preschool is a not-for profit organization founded in 1998, governed by a Board of Directors from the Lawson United Methodist Church. Our philosophy is to help each child feel better about him/herself, to grow personally, socially, physically, mentally, and emotionally.

## **EDUCATIONAL PROGRAM**

Our staff consists of a director, teachers, administrative assistants and adult workers. The curriculum offered in your child's class is designed for his/her age level and ability. The program is structured in a manner that consists with units of study relating to the home, community and the environment around him/her. As each unit of study is enjoyed, the children's songs, games, stories and artwork will correlate with each unit. These units will be used with a certain amount of flexibility gearing them to the child's needs and his/her everyday surroundings. Each day is divided into literacy and motor activities, music, arts and crafts, mathematics, science, centers and snack time.

Weekly newsletters will be sent home with the children to keep parents updated on the latest classroom work, upcoming events and reminders.

# The Learning Lighthouse Preschool Curriculum

## Social and Emotional Development

- ❖ Exhibits self-awareness
- ❖ Develops self-control
- ❖ Develops personal responsibility
- ❖ Builds relationships of mutual trust and respect with others
- ❖ Works cooperatively with children and adults
- ❖ Shows curiosity
- ❖ Takes initiative
- ❖ Exhibits creativity
- ❖ Shows confidence
- ❖ Displays persistence
- ❖ Uses problem-solving skills

## Literacy

- ❖ Represents feelings and ideas in a variety of ways
- ❖ Uses language to communicate ideas, feelings, questions, or to solve problems
- ❖ Listens for different purposes
- ❖ Use writing as a means of expression/communication
- ❖ Applies early reading skills
- ❖ Attends to sounds in language

## Early Mathematics

- ❖ Uses numbers to show quantity
- ❖ Uses language to represent number of objects
- ❖ Solves problems using numbers
- ❖ Uses numerical representation

### Pre-geometry and spatial sense

- ❖ Investigate positions and location
- ❖ Explores shapes in the environment
- ❖ Recognizes relationships in the environment
- ❖ Uses patterns in the environment

### Measurement

- ❖ Makes comparisons
- ❖ Uses measurement

### Exploring data

- ❖ Collects, organizes and uses information

## **Early Physical Development Health and Safety**

### Physical Development

- ❖ Uses gross motor skills with purpose and coordination
- ❖ Uses fine motor skills with purpose and control
- ❖ Responds to sensory input to function in the environment
- ❖ Practices healthy behaviors
- ❖ Practices safe behaviors

## **Early Science**

### Physical Science

- ❖ Explores and investigates physical properties of objects and materials
- ❖ Solves problems involving physical properties of objects and materials
- ❖ Represents observations of the physical world in a variety of ways

### Life Science

- ❖ Explores and investigates characteristics of living things
- ❖ Solves problems related to living things
- ❖ Represents observations about living things in a variety of ways

### Earth and Space

- ❖ Explore and investigates properties of Earth and Space
- ❖ Solves problems involving Earth and Space
- ❖ Represents observations

## **Developmental Skills**

Following are skills that will be addressed during the school year. Teachers will provide a progress report once a year covering these skills. Parents are encouraged to practice these skills at home to help ensure their child's success.

## **DEVELOPMENTAL SKILLS CHECKLIST 3 & 4 YEAR OLDS**

### **LANGUAGE**

- Speaks in 4-6 word sentences
- Memorizes and repeats simple songs/nursery rhymes
- Follows simple directions
- Verbalizes feelings (e.g. happy, sad, angry...)
- Listens to short stories, fairy tales, songs and poems
- Names objects in immediate environment
- Participates in group activities

### **MATH**

- Identifies colors: red, orange, brown, green, blue, pink, yellow, purple, black
- Matches colors
- Sorts objects by color
- Identifies shapes: circle, triangle, square, star, rectangle, heart, oval, diamond
- Counts to 10 orally
- Counts up to 10 objects
- Understands one-to-one correspondence (e.g. matches four socks to four shoes)
- Identifies numbers: 0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10

### **SELF HELP/INDEPENDENCE**

- Names major body parts
- Can state own name and age
- Washes hands properly without help
- Helps clean up after play
- Attends to bathroom needs without help
- Beginning to understand likenesses and differences between self and others
- Asks questions
- Beginning to participate in group settings
- Enjoys being with other children

### **LARGE/SMALL MOTOR SKILLS**

- Claps to music
- Makes “snakes” with play dough
- Uses scissors
- Hold crayon properly
- Paints with large brush
- Runs, skips, hops, gallops, jumps, walks on balance beam
- Can draw lines, circles, start writing letters in first name
- Colors within the lines

## **DEVELOPMENTAL SKILLS CHECKLIST 4 & 5 YEAR OLDS**

### **LANGUAGE**

- Speaks in complete sentences
- Speaks clearly
- Memorizes and repeats simple songs/nursery rhymes
- Follows simple directions
- Verbalizes feelings (e.g. happy, sad, angry...) appropriately
- Listens to short stories, fairy tales, songs and poems

### **MATH/ACADEMIC/PRE-READING/PRE-WRITING**

- Identifies colors: red, orange, brown, green, blue, pink, yellow, purple, black
- Says the alphabet
- Recognizes upper & lower case D'Nealian letters
- Rote counting to 20
- Meaningful counting to 20
- Identifies shapes: triangle, circle, square, rectangle, diamond, star, oval, heart
- Identifies numbers: 0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10
- Understands concept of opposites
- Able to classify objects correctly
- Understands concept of biggest and smallest
- Understands how to make a pattern

### **SELF HELP/INDEPENDENCE**

- Leaves parents at the door when arriving at school
- Shares or takes turns with peers
- Plays well with others and develops relationships
- Washes hands properly without help
- Helps clean up after play
- Attends to bathroom needs without help
- Pays attention during tasks and completes them
- Cares for group and personal possessions
- Asks questions (expresses curiosity)
- Is a problem solver
- Knows own personal information (name, age, gender, etc)

### **LARGE/SMALL MOTOR SKILLS**

- Zips and buttons pants or coats
- Holds and cuts with scissors properly
- Uses small dots of glue
- Holds pencil correctly with an adult-like grasp
- Runs, skips, hops, gallops, jumps, walks on balance beam
- Can draw simple pictures (e.g. stick people and shapes)
- Colors within the lines
- Writes first name correctly using D'Nealian handwriting

## **ADMISSIONS AND ENROLLMENT POLICIES**

- A) Each child must have a completed state Child Enrollment Form.
- B) Each child must have a completed Medical Exam Report signed by their physician.
- C) Each child must have a current copy of their immunization record.
- D) Each child must have a signed copy of the Notice of Parental Responsibility form.
- E) Each child must have a completed and NOTARIZED Medical Authorization form.
- F) Parents may view their own child's records with written request during school hours. Any special needs information will be kept on file.
- G) ALL FORMS MUST BE COMPLETED AND RETURNED TO THE LEARNING LIGHTHOUSE PRESCHOOL ON OR BEFORE THE FIRST DAY SCHOOL.

## **FEES/PAYMENT OPTION**

Preschool tuition is based on a yearly rate regardless of days missed. Tuition is due the 1<sup>st</sup> of each month. If not paid by the 1<sup>st</sup>, parents will be notified with a phone call from the preschool Financial Coordinator. If payment has not been received by the 5<sup>th</sup> of the month, parents will be notified that their child cannot attend preschool until payment has been made. Effective beginning the 2008-2009 preschool year, the Learning Lighthouse Preschool will offer three methods of payment. Make checks payable to Learning Lighthouse Preschool. Please read and indicate your payment preference. Tuition Fees are:

\$675 a year for 3 days a week

\$585 a year for 2 days a week

\$75 non-refundable enrollment/snack fee (Due at time of sign up)

### **PRE-KINDERGARTEN 4-5 yr. old**

\_\_\_\_\_ \*Option 1: One \$660 payment paid by first day of school. (Receive \$15 tuition discount)

\_\_\_\_\_ \*Option 2: Two \$332.50 payments paid by first day of school and by the first school day in January 2009. (Receive \$10 tuition discount)

\_\_\_\_\_ Option 3: Nine \$75 payments paid first day of each month. The last tuition payment is due May 1, 2009.

### **EARLY PRESCHOOL 3-4 yr. old**

\_\_\_\_\_ \*Option 1: One \$570 payment paid by first day of school. (Receive \$15 tuition discount)

\_\_\_\_\_ \*Option 2: Two \$287.50 payments paid by the first day of school and by the first school day in January 2009. (Receive \$10 tuition discount)

\_\_\_\_\_ Option 3: Nine \$65 payments paid first day of each month. The last tuition payment is due May 1, 2009.

\_\_\_\_\_ \*Note a discount has been applied for Option 1 and Option 2. Options listed above do not include the enrollment/snack fee.

## **ATTENDANCE**

Please notify the Preschool if your child will be absent due to illness or vacation.

## **LATE PICK-UP**

Please be on time to pick up your child or make other arrangements. Depending on what class your child attends school is dismissed at 11:30, 3:00 or 11:15. We appreciate your promptness.

## **SEPARATION ANXIETY**

Our staff will work to make the learning environment as positive as possible for your child. However, separating from parents can be very difficult. Anxiety about staying with new adults can be scary and tears/clinginess can occur. By establishing a consistent routine of arriving promptly to school and leaving immediately, your child will become more independent and self-confident. If parents feel anxiety and stay around too long, children tend to sense their parents' worry and then react in a negative fashion.

If you would like to set up a time to come and visit the preschool, please wait until a routine has been established and your child can successfully leave you at the door. Contact the Director so she will know that you would like to visit. Together as a team, parents and teachers can help prepare your preschooler for their future and life's challenges.

## **NUTRITION/SNACKS**

Each child will pay a snack fee at the time of enrollment. This will ensure that they receive a snack and drink during each class they attend. The preschool will be responsible for providing the snack and drink. The state recommends that the snack and drink be a healthy part of 2 food groups.

## **ADULT WORKERS**

The preschool may have adult workers in the classroom to assist the teacher. If anyone is interested in being an adult worker please contact the Director. Each adult worker **MUST** have the following completed to work with the children:

- Safe Sanctuary Certified
- Completed Medical Examination form signed by your physician
- Completed TB test with verification of results
- Background check through the MO Department of Health and Senior Services Family Care Registry
- Signed Statement of Acknowledgement
- Signed Statement of Confidentiality

## **SERVICE OPPORTUNITIES**

There are several opportunities for you as a parent to be involved with the preschool.

Serve on the preschool board

- ❖ Help with preschool programs (Christmas, Graduation)
- ❖ Repair broken equipment
- ❖ You may also purchase a gift for the preschool in honor of any occasion.

## **CHILD HEALTH POLICIES**

On or before the first day of school the student shall return to school the Medical Exam Report along with a current copy of their immunizations. (See Admissions and Enrollment Policies)

Each child shall be observed for contagious diseases and other signs of illness on arrival and throughout the day. A parent or guardian shall be contacted when signs of illness are observed. When a child exhibits any of the following symptoms the parent shall be contacted and sent home. Parental contact shall be recorded and filed in child's records.

- ❖ More than one abnormally loose stool.
- ❖ Red or blue in the face or makes high-pitched croup or whooping sounds after coughing.
- ❖ Difficult or rapid breathing.
- ❖ Yellowish skin or eyes.
- ❖ Unusual spots or rashes.
- ❖ Sore throat or swallowing difficulty.
- ❖ An infected skin patch that is crusty, bright yellow, dry or gummy areas of the skin.
- ❖ Unusually dark, tea-colored urine.
- ❖ Gray or white stool
- ❖ Fever of or over one hundred degrees Fahrenheit (100)
- ❖ Headache and stiff neck
- ❖ Vomiting
- ❖ A child is in the contagious period of a disease
- ❖ Sever itching of the body or scalp, which may be symptoms of lice or scabies.
- ❖ An ill child shall be kept isolated from the other children and a caregiver shall be in close proximity to the child until a parent arrives. Close proximity means that a caregiver is close enough to hear any sounds a child might make that indicate a need for assistance.
- ❖ Should a child become ill at school the parent or friend listed on the application will be called to come for the child.
- ❖ Please notify the school if your child becomes ill with one of the contagious diseases such as mumps, chicken pox, measles, etc., so that we may notify the parents of other children in the class who were exposed.
- ❖ If your child has head lice, you need to get the medicated lice treatment shampoo. All eggs (nits) must be removed from the child's head before your child will be readmitted to the preschool. Please bring the shampoo bottle or label and after a visual head check by the directors, your child will be readmitted.

## **MEDICATION**

Due to sessions of 2 ½ to 3 hours, please arrange your child's medication to be taken before or after the school sessions. The Director will administer medication to a child **ONLY** if determined by the Preschool Board of Directors.

## **INJURIES**

Our staff makes every effort to ensure the safety of your child. Unfortunately, minor accidents may occur. As your partner in the care of your child, we realize that you will want to be aware of your child's injuries or illnesses that occur at The Learning Lighthouse Preschool. In order to keep you informed, the Director/Teacher will contact you about any injury. If the Director/Teacher is unable to contact the parent, written notice will be sent home with the child. In case of a serious accidental injury, we will make every attempt to contact you for instructions. If we cannot reach you, we will call the person you have indicated on the enrollment form to make medical emergency decisions about your child. Please keep these numbers updated on all enrollment forms. The signed AND notarized emergency medical release will also assist us in getting prompt medical attention for your child.

## **CHILD SAFETY AND SECURITY**

The children shall not be left without adult supervision. A caregiver shall personally admit each child upon arrival and personally dismiss each child upon departure. Children shall be dismissed only to a parent, guardian, and legal custodian or to individuals approved by a parent, guardian or legal custodian. You must personally admit each child by signing the "Sign In/Sign Out Form".

## **DISCIPLINE POLICIES**

All children need guidance and discipline to help them grow emotionally, to learn to make good decisions and to learn self-discipline. Children benefit most when adults explain their expectations in simple, understandable terms and encourage acceptable behavior with praise and encouragement. The following guidelines for discipline will be used:

- When a child exhibits an inappropriate behavior, an explanation is given as to why it is inappropriate. The child is asked to change the behavior. The child is told that if he exhibits this behavior again, he/she will receive a time-out or will go to a safe spot.
- If inappropriate behavior continues the parent will be called and a course of action will be determined.

At the Learning Lighthouse Preschool corporal punishment is never used. Children are never hit, slapped, or spanked, even with parental permission or request. Children are not ridiculed, humiliated, teased, or embarrassed. When children are engaged in an enjoyable activity, the need for discipline is diminished. It is important for good communication to exist between the family and The Learning Lighthouse Preschool. If a child is experiencing a change in the home environment that may result in behavioral differences, it is important for you to notify the Director/Teacher. The Director/Teacher will keep you informed of any behavioral problems concerning your child. Every effort will be made to resolve any problem that may occur. The Learning Lighthouse Preschool reserves the right to ask you to make alternative arrangements for the care of your child.

## **CLOTHING**

Children are encouraged to wear play clothes. We **REQUIRE** that a complete change of clothes should be placed in a plastic bag and kept in the child's backpack in the event of a spill or an accident. Please replace with another set of clothes if we send any soiled ones home. Boots, hats, coats, gloves and other clothing generally removed at school must be plainly marked with the child's name.

## **TOY POLICY**

In order that children are not disappointed with a broken or lost toy, we ask that they use the toys that we provide.

## **EMERGENCY DRILLS**

Emergency drills are held periodically to acquaint your child with evacuation and other emergency procedures. This may make quite an impression on your child the first time a drill is held, but your child will soon become accustomed to it and now just what to do.

## **SCHOOL CLOSINGS FOR WEATHER**

If it is announced on the radio or TV that the Lawson RXIV School District is closed because of severe weather, the Preschool will be closed. If the Lawson RXIV School District closes early due to weather the Preschool will also close early. During the winter please watch the weather and listen to the radio or TV for early dismissals. School days missed because of inclement weather will not be made up.

## **HOLIDAY CLOSINGS**

The Learning Lighthouse Preschool follows the Lawson RXIV School District calendar except for the first and last days of school.

## **SCHOOL PICTURES**

Individual and class pictures will be taken at the school when it is convenient for teachers and students and at the discretion of the Director. Purchase arrangements will be announced prior to picture day. Purchase of the pictures is optional.

## **FIELD TRIPS**

Due to recent changes in Safe Sanctuary requirements with the United Methodist Church and new car seat laws the preschool will not be able to take students on field trips.





MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BUREAU OF CHILD CARE  
**CHILD ENROLLMENT**

CHILD'S NAME		SEX	BIRTHDATE
ADDRESS (STREET, CITY, STATE, ZIP CODE)		HOME TELEPHONE NUMBER ( )	
<b>OPTIONAL</b>	<b>SCHOOL CHILD ATTENDS</b>		
	NAME	TELEPHONE NUMBER ( )	
	ADDRESS (STREET, CITY, STATE, ZIP CODE)		
<b>IDENTIFYING INFORMATION</b>			
A) MOTHER'S OR GUARDIAN'S NAME		HOME TELEPHONE NUMBER ( )	
ADDRESS ( <input type="checkbox"/> SAME AS CHILD/OR STREET, CITY, STATE, ZIP CODE)			
EMPLOYED BY (OR SCHOOL ATTENDED)		HOURS OF EMPLOYMENT FROM TO	
ADDRESS (STREET, CITY, STATE, ZIP CODE)		BUSINESS TELEPHONE NUMBER ( )	
B) FATHER'S OR GUARDIAN'S NAME		HOME TELEPHONE NUMBER ( )	
ADDRESS ( <input type="checkbox"/> SAME AS CHILD/OR STREET, CITY, STATE, ZIP CODE)			
EMPLOYED BY (OR SCHOOL ATTENDED)		HOURS OF EMPLOYMENT FROM TO	
ADDRESS (STREET, CITY, STATE, ZIP CODE)		BUSINESS TELEPHONE NUMBER ( )	
<b>EMERGENCY CONTACT(S) (OTHER THAN PARENT(S) OR DOCTOR) AT LEAST ONE REQUIRED</b>			
NAME		TELEPHONE NUMBER ( )	
ADDRESS (STREET, CITY, STATE, ZIP CODE)		RELATIONSHIP	
<b>OPTIONAL</b>	NAME		TELEPHONE NUMBER ( )
	ADDRESS (STREET, CITY, STATE, ZIP CODE)		RELATIONSHIP
<b>PERSON(S) AUTHORIZED TO TAKE CHILD FROM THE CHILD CARE FACILITY:</b>			
NAME		NAME	
<b>COMMENTS ON CHILD'S DEVELOPMENT</b> (NOTE ALLERGIES, HABITS, SPECIAL LANGUAGE, ETC.)			
<hr/> <hr/> <hr/>			
<b>TO BE COMPLETED BY CHILD CARE FACILITY</b>			
ADMISSION DATE			
ENROLLED FOR (DAYS OF WEEK)			
HOURS PER DAY FROM TO			
DISCHARGE DATE (TO BE RETAINED FOR ONE YEAR AFTER DISCHARGE)			

**AUTHORIZATION FOR EMERGENCY MEDICAL CARE**

I understand that I will be notified at once in case of accident or illness to my child, and I will make arrangements for medical care of my child with the physician or hospital of my choice.

If I cannot be reached to make necessary arrangements, or in a critical emergency requiring medical care, I hereby authorize \_\_\_\_\_ PROVIDER

(Please list name & phone # of doctor, hospital or both)

**To Contact Doctor/Clinic:**

NAME	TELEPHONE ( )
ADDRESS (STREET, CITY, STATE, ZIP CODE) - OPTIONAL	

**For Emergency Medical Treatment Of My Child, My Preferred Hospital Is:**

NAME	TELEPHONE ( )
ADDRESS (STREET, CITY, STATE, ZIP CODE) - OPTIONAL	

**TRIP AND ACTIVITY PERMISSION**

I  do  do not give consent for my child to take part in field trips or excursions with this child care facility under proper supervision.

I understand I will be notified when such trips are planned and that I must give written permission for each field trip or excursion.

I  do  do not give permission for the facility to transport my child to and from school.

NAME OF SCHOOL	ADDRESS
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**AGREEMENTS**

- a) The provider and I have agreed on a plan for continuing communication regarding my child's development, behavior etc.
- b) When my child is ill, it is understood and agreed that s/he may not be accepted for care.
- c) I have received a copy of this facility's policies pertaining to the admission, care and discharge of children.
- d) I have been informed that a copy of the Licensing Rules for Family Child Care Homes/Licensing Rules for Group Child Care Homes/Licensing Rules for Child Care Centers in Missouri is available at this facility for review.

PARENT/LEGAL GUARDIAN SIGNATURE	DATE
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**HEALTH REPORT FOR SCHOOL-AGE CHILD**

**CHILD'S HEALTH HISTORY AND CURRENT HEALTH PROBLEMS**

ANY ALLERGIES, SPECIAL MEDICAL CONDITIONS, INCLUDING CHRONIC HEALTH PROBLEMS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ANY SPECIAL MEDICATIONS AND/OR RESTRICTIONS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>THIS CERTIFIES THAT MY CHILD IS, TO MY KNOWLEDGE, IN GOOD HEALTH AND FREE OF DISABILITIES THAT WOULD ENDANGER HIM/HER OR OTHER CHILD IN DAY CARE.</b>	PARENT OR LEGAL GUARDIAN SIGNATURE	DATE
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MISSOURI DEPARTMENT OF HEALTH  
 BUREAU OF CHILD CARE SAFETY & LICENSURE  
 MEDICAL EXAMINATION REPORT (INFANT/TODDLER & PRESCHOOL-AGE CHILD)

**I. IDENTIFYING INFORMATION**

PATIENT'S NAME	BIRTHDATE
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**II. CURRENT STATE OF HEALTH**

I HAVE EXAMINED THE ABOVE-NAMED CHILD AND VERIFY THAT THIS CHILD'S MEDICAL HISTORY AND CURRENT STATE OF HEALTH

ARE  ARE NOT SATISFACTORY FOR PARTICIPATION IN A CHILD CARE PROGRAM.

DOES THIS CHILD REQUIRE ANY SPECIALIZED CARE?  YES  NO

IF YES, EXPLAIN IN SECTION IV.

**III. IMMUNIZATION HISTORY**

OUR RECORDS INDICATE THAT THIS CHILD HAS THE FOLLOWING IMMUNIZATIONS:

IMMUNIZATIONS	DATES GIVEN					
	Dose No. 1	Dose No. 2	Dose No. 3	Dose No. 4	Dose No. 5	Dose No. 6
DPT/DT/DTAP						
Polio						
Hib						
MMR						
Hepatitis B						

**IV. COMMENTS/RECOMMENDATIONS**

(SPECIAL DIETS, ALLERGIES, EAR INFECTIONS, CONVULSIONS, DIABETES, EMOTIONAL PROBLEMS)

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

SIGNATURE OF PHYSICIAN OR REGISTERED NURSE UNDER THE SUPERVISION OF A PHYSICIAN	DATE	PHYSICIAN'S OR NURSE'S NAME (PLEASE PRINT)
NAME OF CLINIC, GROUP PRACTICE, OTHER	IF NURSE IS SUPERVISED BY PHYSICIAN, INDICATE PHYSICIAN'S NAME	
ADDRESS (STREET, CITY, STATE, ZIP CODE)	TELEPHONE NUMBER ( )	



ing Lighthouse Preschool  
 504 N. Pennsylvania  
 Lawson, MO 64062  
 816-296-3210



**MEDICAL AUTHORIZATION**

If you cannot locate us (the parents or guardians), you have our  
 on:

\_\_\_\_\_ Parent's Signature

\_\_\_\_\_ Date

Child's Physician

Office Address

Office Phone #

\_\_\_\_\_ Hospital of Parent's Choice

\_\_\_\_\_ Hospital Telephone #

**PLEASE HAVE THIS MEDICAL AUTHORIZATION FORM NOTARIZED.**

Please list all of your contact numbers during school hours, so that we can get a hold of you in case your child should become ill or hurt at school. Thank you.



Learning Lighthouse Preschool  
 504 N. Pennsylvania  
 Lawson, MO 64062  
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## **PAYMENT AGREEMENT FORM**

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\$75 non-refundable enrollment/snack fee (Due at time of sign up)

### **PRE-KINDERGARTEN 4 & 5 yr**

\*Option 1-One \$660 payment paid by first day of school. (Receive \$15 tuition discount)

\*Option 2 -Two \$332.50 payments paid by first day of school and by first school day in January 2009 (Receive \$10 tuition discount)

Option 3- Nine \$75 payments paid first day of each month. The last tuition payment due May 1, 2009

### **EARLY PRESCHOOL 3 & 4 yr**

\*Option 1- One \$570 payment paid by first day of school. (Receive \$15 tuition discount)

\*Option 2 -Two \$287.50 payments paid by the first day of school and by first school day in January 2009 (Receive \$10 tuition discount)

Option 3-Nine \$65 payments paid first day of each month. The last tuition payment is due May 1, 2009.

\*Note a discount has been applied for Option 1 and Option 2. All Options above are for tuition only. This does not include enrollment/snack fee.

Child's Name: \_\_\_\_\_

Name and phone number of person responsible for payment: \_\_\_\_\_

Signature: \_\_\_\_\_



