



# St. Paul Children's Enrichment Center (CEC)

## St. Paul United Methodist Church

8264 Lone Star Road † Jacksonville, Florida 32211

904-724-0931 † www.stpauljax.org

### Child Enrollment Application

Please Print

Today's Date \_\_\_\_\_

#### Child's Information

Child's Full Name \_\_\_\_\_  
First Middle Last Suffix

Name Child Goes By \_\_\_\_\_ Date of Birth \_\_\_\_\_

Gender:  Male  Female Race \_\_\_\_\_ St. Paul CEC Status:  New to St. Paul CEC  Previously Enrolled in St. Paul CEC

Days and Times Child Care Will be Needed: Beginning Enrollment Date \_\_\_\_\_

- VPK Only
- VPK Plus Childcare
- Monday From \_\_\_\_\_ To \_\_\_\_\_ & From \_\_\_\_\_ To \_\_\_\_\_
- Tuesday From \_\_\_\_\_ To \_\_\_\_\_ & From \_\_\_\_\_ To \_\_\_\_\_
- Wednesday From \_\_\_\_\_ To \_\_\_\_\_ & From \_\_\_\_\_ To \_\_\_\_\_
- Thursday From \_\_\_\_\_ To \_\_\_\_\_ & From \_\_\_\_\_ To \_\_\_\_\_
- Friday From \_\_\_\_\_ To \_\_\_\_\_ & From \_\_\_\_\_ To \_\_\_\_\_

If School Age: Grade Level \_\_\_\_\_ School \_\_\_\_\_

Transportation Needed:  To School from CEC  From School to CEC

#### Family Information

Child Lives With  Both Parents  Mother  Father  Grandparents  Other \_\_\_\_\_

Home Address \_\_\_\_\_  
Street Apt. # City Zip Code

Home Phone \_\_\_\_\_ Primary E-mail Address \_\_\_\_\_

Custody  Both Parents  Mother  Father  Grandparents  Other \_\_\_\_\_

#### Mother/Parent/Guardian's Information

Mother's Full Name \_\_\_\_\_  
First Middle Last Suffix

Home Address \_\_\_\_\_  
Street Apt. # City Zip Code

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Mother's Employer \_\_\_\_\_ Department/Position \_\_\_\_\_

Emergency Contact  Allowed to pick up child Church Affiliation \_\_\_\_\_

#### Father/Parent/Guardian's Information

Father's Full Name \_\_\_\_\_  
First Middle Last Suffix

Home Address \_\_\_\_\_  
Street Apt. # City Zip Code

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Father's Employer \_\_\_\_\_ Department/Position \_\_\_\_\_

Emergency Contact  Allowed to pick up child Church Affiliation \_\_\_\_\_

**Emergency Contacts (Emergency Contacts other than Parents)**

Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident or emergency, if for some reason the custodial parent or legal guardian cannot be reached. A picture ID will be checked. If the information below changes after this application is submitted, then it is the responsibility of the parent to provide the St. Paul Children’s Enrichment Center with updated information:

Contact Name	Relation to Child	Primary Phone #	Alternate Phone #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Medical Contacts**

I hereby grant permission for the staff of St. Paul Children’s Enrichment Center to contact the following medical personnel to obtain emergency medical care if warranted:

Physician \_\_\_\_\_ Phone # \_\_\_\_\_

Dentist \_\_\_\_\_ Phone # \_\_\_\_\_

Hospital \_\_\_\_\_ Phone # \_\_\_\_\_

Insurance \_\_\_\_\_ Phone # \_\_\_\_\_ Policy # \_\_\_\_\_

**Enrollment Requirements per Florida Statutes**

- Section 65c-22.006(2), F.A.C., requires a current physical examination form DH3040 and immunization record form DH680 or 681 within 30 days of enrollment.
- Section 402.3125(5), F.S., requires that parents receive a copy of the Child Care Facility brochure, “Know Your Child Care Facility.”
- Section 65c-22.006(4)2, F.A.C., requires that parents are notified in writing of the disciplinary practices used by the St. Paul Children’s Enrichment Center.

**Enrollment Requirements per St. Paul Children’s Enrichment Center**

A \$55.00 Administrative Fee is due at the time of registration. Your child will not be officially enrolled until the Administration Fee is paid. The first week’s tuition is required to be paid prior to your child’s first day of enrollment. A \$25.00 Supply Fee for PK1-PK3 if required to be paid prior to your child’s first day of enrollment. All fees and/or tuition payments may be paid by check or money order payable to St. Paul United Methodist Church (please put CEC & your child’s name in the memo line.) We are unable to accept cash payments.

**Parent/Guardian Acknowledgment**

By signing below, I acknowledge that I have received the items required by Florida Statutes listed above, I have received a copy of the St. Paul Children’s Enrichment Center Parent’s Handbook, and that all the information that I have entered on this enrollment form is complete and accurate.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date Signed

**For CEC Office Use Only:**

Administration Fee Paid  Supply Fee Paid  Supply Fee Not Applicable  1<sup>st</sup> Week Tuition Paid: \$ \_\_\_\_\_

Class Assignment: \_\_\_\_\_ Teacher Assignment: \_\_\_\_\_

Enrollment Notes: \_\_\_\_\_