

The Blue Elephant

Learning Center

Checklist:

We're so happy to have your family join our TBE family!

Please check off each form as you complete it and place it back in the folder.

- ___ TBE Enrollment Contract
- ___ Student Application & Personality Profile
- ___ Admission Agreement
- ___ The Blue Elephant Code of Conduct & Discipline Policies
- ___ Student Health & Immunizations 2021/2022 School Year
- ___ Allergy Information Form & Action Plan (if applicable)
- ___ Student Emergency Form (don't forget to complete the backside)
- ___ Tuition Agreement
- ___ Tuition Express (one side is for automatic withdraw from your credit card and the other side is for automatic withdraw from your checking account)
- ___ 4 Year Old Hearing & Vision Screening (if applicable: on the reverse side of the Student Health & Immunizations form)
- ___ Special Savings Agreement

2021-2022 TBE Enrollment Contract

This is a legally binding contract. Please read it carefully.

Date: _____

This Contract is between The Blue Elephant Learning Center (hereinafter the "School") and the parent(s) or legal guardian(s) (referred to as "Parent," which term includes the singular or plural, as applicable) of _____ [insert student name] (hereinafter "Student"). All persons signing this Contract are jointly and severally liable for the tuition and fees set forth. Parent's signature and/or initials on this Contract are evidence of the Parent's understanding and agreement to the terms of this Contract, as follows:

1. **Enrollment:** Student, if accepted, will be enrolled for all of the 2021 - 2022 academic year in (circle one):

Infants Toddlers School-Readiness School-Readiness 3-Day School-Readiness 2-Day Pre-K Pre-K 3-Day Pre-K 2-Day

Parent is aware that classroom placement will be determined by the School in accordance with the School's standard admissions or retention practices and curriculum. Changes/decisions are made at the School's discretion. The Contract is valid only for the academic year stated and does not entitle Student to any future enrollment.

2. **Enrollment Fee :** _____ (Initial(s)). Parent understands that for the School to consider Student's application and to conditionally reserve a place for Student for the academic year stated above, Parent must submit the original executed Contract, along with a \$100 Enrollment Fee, made payable to The Blue Elephant Learning Center within 10 days of the date of this Contract.

The Enrollment Fee will be applied to tuition for the academic year covered by this Contract. The Enrollment Fee is non-refundable unless the School rejects, in its sole discretion, Student's application for admission and unilaterally cancels this Contract. The Enrollment Fee may be transferable at the discretion of the School.

3. **Tuition :** _____ (Initial(s)). Tuition amounts for the various programs are set forth on the Tuition Schedule for the period covered by this Contract. Parent has selected the following payment plan for tuition (check only one box) and checked the Sibling Discount if applicable (see Tuition Schedule for further details):

☐ Plan A (Two-Payment Plan) ☐ Plan B (Ten-Payment Plan) ☐ Plan C (Forty-One-Payment Plan)

☐ Sibling Discount. The School offers the following sibling discounts: For two students enrolled, a 5% discount off the oldest child's tuition; For three or more students enrolled, a 10% tuition discount on the total tuition.

Please indicate the name(s) of other sibling(s) enrolled: _____

4. **Tuition Obligation:** _____ (Initial(s)). Parent understands that Student is being enrolled for the entire academic year or period covered by this Contract. Parent further understands that the overhead expenses of the School do not diminish with the departure of some students during the course of the academic year and agrees that it is impossible for the School to determine at the time of Parent's execution of this Enrollment Contract the damage and loss to the School that would occur due to the later cancellation/ withdrawal of some of the students who have enrolled. Therefore, once this Contract has been submitted to the School with the Enrollment Fee set forth in Paragraph 2, Parent becomes liable for the entire year's tuition and fees as liquidated damages (and not a penalty) even if the Student is withdrawn, absent, or is involuntarily separated from School UNLESS the Parent terminates this Contract in strict accordance with the termination procedures set forth in Paragraph 5 below (or the School rejects, at its sole discretion, Student's application and unilaterally terminates this Contract). If Student is withdrawn, absent, or involuntarily separated, for any reason, including without limitation, change of residence, health, withdrawal, or expulsion there will be no refund or reduction of fees or tuition, and any unpaid balance may, at the School's election, become immediately due and payable.

5. **Termination Procedures:** _____ (Initial(s)). Parent may terminate this Contract by submitting at least a 30 day WRITTEN Termination Notice to the Director. The Termination Notice must (a) be dated, (b) state the Student's name, (c) provide a reason for the termination of the Contract; and (d) be RECEIVED by the Director on or before 30 days of the termination date.

6. **School Rules:** Student's enrollment at the School is subject to the general statements, rules, regulations, conditions, and financial terms contained in the School's Parent Handbook and other published documents, which may be amended from time to time. Parent acknowledges that Parent and Student must abide by such School rules and guidelines.

- 7. Termination of Student's Attendance:** The School has the right to suspend or terminate the attendance of any student for reasons set forth in the Parent Handbook (or other published document), for reasons that the School Administration considers detrimental to the School community, student, or to other students of the School, or for the Parent's failure to pay all or any part of the Parent's financial obligations for Student's attendance (including any amounts charged on Student's account with the School).
- 8. Payment and Late Fees:** _____(Initial(s)). Parent understands and agrees that a \$50 fee will be applied to any payment that is not received by 6:00pm on Monday. An additional \$25.00 fee will be applied to any payment that is not received by 6:00pm on Tuesday. Full payment not received by 9am on Wednesday will result in withdrawal of the student.
- Late Arrival Fee:** Like you, family time is of utmost importance. For the teachers and staff at TBE, family time begins at 6:00pm. In respect of this precious time, a \$75 fee will be added to the weekly payment of any child checked-out between 6:01pm and 6:10pm. An additional \$10 will be applied every 5 minutes beginning at 6:10pm until the child is checked-out. At the Director's discretion, failure to respect this policy may result in your child being withdrawn from TBE.
- Returned Check Fee:** A \$50 fee will be added to your weekly fee for all returned checks. After two returned checks, you may only pay by cash or money order.
- 9. School/Family Cooperation:** A positive and constructive relationship between the School and Family Member (defined as Parent, Student, or other person associated with Student) is essential to the School's educational purpose and responsibilities to its students. If any Family Member engages in behavior, communications, or interactions on campus, that is disruptive, intimidating, overly aggressive, or reflects a loss of confidence in or disagreement with the School's policies, methods of instruction or discipline, or otherwise interferes with the School's safety procedures, responsibilities, or accomplishment of its educational purpose or program, the School reserves the right to dismiss the Family or Family Member from the community. The School may also place restrictions on a Family Member's involvement or activity at School for other reasons that the School deems appropriate. Any determination under this Paragraph shall be at the School's sole discretion. There will be no refund of tuition where such dismissal occurs and any unpaid balance is payable in full according to the terms of this Contract. The School also reserves the right to withdraw an offer of enrollment or re-enrollment at any time and to void an executed Enrollment Contract.
- 10. Academic Calendar & Holidays:** School will be in session from August 16th-May 27th with the following holidays and early release: Labor Day, September 6th; Thanksgiving, November 25th & 26th; Christmas, December 20th-24th; New Years Day (Observed December 31st; Good Friday, April 15th; Memorial Day, May 30th.
- 11. Force Majeure:** The School's duties and obligations under this Contract shall be suspended immediately without notice during all periods that the School is closed because of force majeure events including, but not limited to, any fire, act of God, tornado, war, governmental action, civil unrest, act of terrorism, epidemic, pandemic, or any other event beyond the School's control. If such closure occurs, the School's duties and obligations in this Contract will be postponed until such time as the School, at its sole discretion, may safely reopen. In the event that the School cannot reopen due to an event under this clause, the School is under no obligation to refund any portion of the tuition paid.
- 12. Understanding of Terms:** Please read this Contract carefully. By signing below, Parent acknowledges that Parent understands the terms of this Contract.
- 13. Entire Agreement:** This Agreement sets forth the entire understanding of the parties hereto with respect to the subject matter hereof and merges and supersedes all prior and contemporaneous oral understandings between the parties. There have been no representations or warranties made by any party other than the representations and warranties contained herein.

*Both parents must sign (unless the School, at its discretion, permits enrollment with one parent's signature).

_____	_____
*Signature of Parent 1 (or legal guardian)	Date

_____	_____
*Signature of Parent 2 (or legal guardian)	Date



THE BLUE ELEPHANT

Learning Center

Student Application and Personality Profile

Child's Name: _____

Date of Birth: _____

Is English your child's first language?

Other language(s) spoken at home: _____

What holidays do you celebrate at home?

(i.e. Christmas, Hanukkah, no celebrations, etc.)

What does your child enjoy doing at home for fun?

What worries or concerns do you have regarding your child?

How do you discipline at home?

How would you describe your child's personality?

Is your family a blended family? _____ If yes, please list the additional family member's name and relationship, as well as custody arrangements if applicable.

Is there anything else you would like us to know about your child? You may use the back of the sheet if needed.

How did you hear about us?

- Social Media _____
- Referral (Referred by) _____
- Internet Search _____
- Drove By _____



Admission Agreement

Child's Name: _____

*The Blue Elephant reserves the right to terminate care if the standards of this agreement are not met.

[Please initial next to each agreement.]

_____ I have read, and agree to comply with the policies and procedures stated in The Blue Elephant Parent Handbook.

Biting is very serious and is unacceptable at The Blue Elephant Learning Center. If your child bites another child, The Blue Elephant will work with you to develop a plan to correct the problem. However, if the biting is aggressive, breaks skin, does not lessen within a reasonable amount of time, or diverts an inordinate amount of staff time away from other children, The Blue Elephant reserves the right to temporarily remove your child from the center. (Please see the back of this sheet for our Biting Policy.)

_____ I will comply with the biting policy for The Blue Elephant Learning Center. I understand that every situation is different and is handle according to the Director's discretion.

_____ I acknowledge that my child's health information may need to be reviewed, as needed or required, by certain individuals and/or agencies. Therefore, I authorize the following persons/agencies access to those records. (Permission is granted to The Blue Elephant Director, Assistant Director, office/teacher staff, Accreditation Personnel, Texas Health Department Personnel, Texas Department of Family & Protective Services – Licensing Personnel.)

_____ My child has permission to be transported by The Blue Elephant Learning Center for field trips and/or to and from school **if applicable**.

_____ My child has permission to participate in Director approved water activities at The Blue Elephant. (Ages 3 years & older.)

✍ I understand that I may contact the local Child Care Licensing office at 535 S. Loop 288 Suite 20, Denton, TX 76205. (940)381-3447 www.dfps.state.tx.us

✍ I understand that I may ask for our most recent Licensing inspection report and/or questions about the *Minimum Standards Rules for License Child Care Centers*.

✍ If you suspect a child is being abused or neglected, call 1-800-252-5400 to make a report.

✍ Parents will be notified in writing as changes in our operational policies.

Printed Parent/Guardian Name _____

Date _____

Parent/Guardian Signature _____

Office Signature _____





Date _____

Biting Policy:

Biting is very serious and is unacceptable at The Blue Elephant Learning Center. If your child bites another child, The Blue Elephant will work with you to develop a plan to correct the problem. However, if the biting is aggressive, breaks the skin, does not lessen within a reasonable amount of time, or diverts an inordinate amount of staff time away from other children, The Blue Elephant reserves the right to temporarily remove your child from the center.

NOTE: No child is automatically withdrawn from TBE, but rather each situation is evaluated on an individual basis. It is at the Director's discretion when and why to remove a child from TBE.

Plan of action for biting that's aggressive and occurs within four weeks.

-  **Step 1:** First bite - verbal correction, redirection, "Thinking Chair" if age-appropriate, and a note home to parents.
-  **Step 2:** Second bite - verbal correction, redirection, "Thinking Chair" if age-appropriate, and meeting with parents.
-  **Step 3:** Third bite - verbal correction, redirection, "Thinking Chair" if age-appropriate, and parents must come pick-up their child. After the third bite, the parents will be asked to keep the child away from the classroom for one week in an effort to break the behavior.
-  **Step 4:** Fourth bite - If the child bites within one week of returning to TBE, then the child will be withdrawn from the center. If the child does not bite for one week after returning, then the plan of action will go back to step one.

DISCIPLINE & GUIDANCE

TBE Parents,

Please review the attached packet and return this page, completed, to the front office along with your enrollment forms.

****Families with more than one child at TBE must fill out one form per student.**

Please initial below.

_____ I have received a copy of TBE's **Code of Conduct & Discipline & Guidance Policies**. I have read, understand, and agree to the stated policies.

_____ I have received a copy of TBE's **High Risk Behavior Policies & Guidelines**. I have read, understand, and agree to the stated policies.

_____ I have received a copy of TBE's **Termination Policy**. I have read, understand, and agree to the stated policies.

Child's Name: _____

Parent's Name: _____

Parent's Signature: _____

Date: _____

Discipline & Guidance @ TBE

Code of Conduct:

BE RESPECTFUL. Being respectful at The Blue Elephant means being kind to other students, teachers, parents, and classroom visitors. It also means taking care of our school by using all toys, books, classroom furniture, and classroom supplies appropriately.

We practice **positive reinforcement & redirection.**

What is **positive reinforcement**?

Positive reinforcement is a technique used by parents and caregivers to change their children's behavior by reinforcing desired behaviors. You can do this with verbal praise or a physical reward.

What is **redirection**?

Redirection is an effective way to teach young children the difference between acceptable and unacceptable behavior by redirecting their attention to another activity, item, or idea. Redirection is a "change of gears" in order to change the unwanted behavior.

Discipline is always handled on this belief:

The child is a good person - it is his/her behavior that is unacceptable and needs to be changed or guided to a more acceptable means of expression.

When a child shows unacceptable behavior, he/she will first be **redirected** to another activity. If the behavior continues, then he/she will have "quiet time" away from the other students in order to take a deep breath and calm his/her emotions. When ready, the child will be allowed to resume normal play and return to the group. In a loving manner, the child's teacher will also discuss with the child the choices that were made and how to improve those choices for next time.

Parents or legal guardians will be notified in writing of all "quiet times" and/or guidance practices their child receives.

High Risk Behavior Policies & Guidelines

GREEN -

When a student displays high risk behavior, as specified below, parents will be notified in writing and by a phone call from the office. Student will also be removed from the classroom until he/she is calm and may return to class.

YELLOW -

If a child continues to display high risk behavior, parents will be notified by phone from the front office and will be required to meet with the director and any other staff that the director deems necessary. Student will also be removed from the classroom & a 2-day suspension from TBE will be required.

RED -

If student continues behavior and the intervention from parents and staff have not been successful, parents will be notified in writing and by phone from the front office the student will be withdrawn immediately. Student will be withdrawn from classroom and parents will be required to pick-up their child immediately.

High Risk Behavior is defined as behaviors that are most likely to place a person/persons at increased risk of being injured or injuring others.

Examples include (but not limited to): slapping, hitting, kicking, biting, spitting, scratching, pushing, punching, & pinching.

Also included is destruction of property.

Examples include (but not limited to): throwing toys/objects, tearing books/personal property, & defacing school property.



Termination Policy

The following are causes for termination of enrollment from The Blue Elephant Learning Center. TBE reserves the right to withdraw a student on an "at will" basis.

1. This preschool is not staffed to provide individual attention for children who may have special needs or require one-on-one attention. Upon evaluation of the student, the director in her sole discretion will determine whether TBE can continue to provide services for such children.
2. Violent, abusive, and/or hyperactive behavior will also be evaluated and will be determined whether TBE can continue to provide services for such children.
3. Frequently disruptive behavior by a child which interferes with the staff's performance or the daily class activities, will be sufficient cause for termination.
4. Following are also causes for immediate termination:
 - Failure to uphold or not cooperating with preschool policies
 - Use of obscenities by the child or parent/guardian
 - Rude or inappropriate conduct, behavior, or attitude directed at the preschool, staff, or other clients/children by a child or parent/guardian
 - When parent/guardian does not follow up on the corrective action agreed upon at any conference
 - Failure to pay tuition within the required tuition due date and/or late tuition charges as per the TBE policy



**This form must be completed and signed
by your child's pediatrician's office.
Please attach immunization records.**

Student Health and Immunizations 2021-2022

Child's Name _____ Sex _____ DOB _____

Date of last physical exam _____

Does this child have any physical conditions of which we should be aware of? NO ___ YES ___

Is this child physically and mentally able to participate in group activities? NO ___ YES ___

May this child participate in the program without special care relating to **allergies, special diet, restriction of activities, or any other chronic condition**? NO ___ YES ___

If no, please explain.

Is this child free of contagious disease? NO ___ YES ___

Are the required immunizations up-to-date? NO ___ YES ___

[] I am excluding my child from immunization requirements for reasons of conscience, including religious beliefs. I have attached an official, notarized affidavit issued by the Department of State Health Services. I understand this affidavit is valid for two years.

Q. How do I obtain a vaccine exemption for reasons of conscience for my child?

A. Parents or guardians need to request a vaccine exemption affidavit form in writing or via a secure online request form from the Department of State Health Services. Each child's name and date of birth must be included in the request.

<https://webds.dshs.state.tx.us/immco/affidavit.shtm>

Physician's Statement: I have examined the above child within the past 12 months and find that he/she is able to participate in the childcare program at The Blue Elephant.

Physician's Signature

Address of Physician's Office

Physician's Name (PRINT)

Date

Phone

Hearing & Vision Screening

"The Special Senses and Communication Disorders Act, Texas Health and Safety Code, Chapter 36, requires a screening or a professional examination for possible vision and hearing problems for children of certain ages and grades."

When does my child need to be screened?

4 years of age, 1st grade, 3rd grade, 5th grade, and 7th grade

The Blue Elephant must have one of the following on file for each child required to be screened: (please attach one of the following to this sheet)

- 1. A printed copy of the individual visual acuity and sweep check results**
- 2. A signed statement from the child's parent that the child's screening records are current and on file at the school the child attends away from the center. The statement must be dated and include the name, address, and telephone number of the school.**
- 3. An affidavit stating that the vision or hearing screening conflicts with the tenets or practices of a church or religious denomination of which the affiant is an adherent or member.**

To be completed by the parent or guardian:

Does your child meet the age or grade requirement to be screened for hearing and vision?

If yes, please attach one of the following items as listed above.

Child's Name: _____

Parent Name: _____

Parent Signature: _____

Date: _____



Student Emergency Form 2021-2022

Child's Name: _____

Start Date: _____ **Date of Birth:** _____

Sex: M F

Primary Address: _____

Allergies/Special Condition:

(If there are no known allergies or conditions, please write "N/A")

My child is allergic to _____

Please be aware of this special condition: _____

Family Information: Sibling(s) Name/Age: _____

Mother's Name: _____ **Father's Name:** _____

Place of Employment: _____ **Place of Employment:** _____

Cell #: _____ **Work #:** _____ **Cell #:** _____ **Work #:** _____

Email Address: _____ **Email Address:** _____

Emergency contact if the parents/legal guardians cannot be reached:

(These people may pick up my child.)

Name: _____ **Relationship:** _____

Phone #: _____ **Address:** _____

Name: _____ **Relationship:** _____

Phone #: _____ **Address:** _____

Additional people who may pick up my child from TBE.

Valid, photo ID is required.

Name: _____ **Phone #:** _____

Name: _____ **Phone #:** _____

Name: _____ **Phone #:** _____

Name: _____ **Phone #:** _____



Authorization for Emergency Medical Attention and Acknowledgments

TBE will always do its best to contact a parent or legal guardian as soon as possible if your child is in need of emergency medical attention.

Please read and initial the following acknowledgments

_____ The Blue Elephant Learning Center has permission to transport my child for emergency medical treatment and to obtain necessary emergency medical treatment from a hospital or emergency center that is deemed best by TBE for the situation.

_____ I have read and understand The Blue Elephant's emergency procedures should my child become seriously injured or ill. I give The Blue Elephant permission to help my child as necessary in an emergency situation.

_____ I have received and read the Parent Handbook. I attest that the information on this form is correct and I will provide the center with updated information as needed. I understand that TBE will use this form until I have completed and signed a new one.

_____ I understand that while present in the facility each day my child will be in contact with children, families and other employees who are also at risk of community exposure. I understand that no list of restrictions, guidelines or practices will remove 100% of the risk of exposure to COVID-19 as the virus can be transmitted by persons who are asymptomatic and before some people show signs of infection. I understand that I play a crucial role in keeping everyone at The Blue Elephant safe and reducing the risk of exposure by following the practices outlined in the Parent Handbook and by state, county, and city health officials.

Email Address / Phone Number Release

Parents of The Blue Elephant may request the email address or phone number of other students in their child's classroom.

Possible reasons for requests may include birthday invitations, thank you notes, etc.

Please initial the appropriate line.

_____ **The Blue Elephant has permission to release our email address/phone number to other parents at TBE.**

_____ **The Blue Elephant DOES NOT have permission to release our email address/phone number to other parents at TBE.**

Photo Authorization

Occasionally teachers or other parents will request to take classroom pictures. Possible reasons for requests may include art projects, group photos, classroom birthday party, bulletin board displays, TBE website, TBE Facebook, or TBE Instagram etc. Please initial the appropriate line.

_____ **My child may be photographed for school related reasons.**

_____ **My child may not be photographed school related reasons.**

Printed Name of Parent/Guardian: _____ Date: _____ Signature of Parent/Guardian: _____

Tuition Agreement

2021 - 2022

Please check an option.

_____ **Plan A:** Semesterly - Half of the yearly tuition is due August 17th & the remainder is due January 4th. Two payments total.

_____ **Plan B:** Monthly - First payment on August 16th & the remaining payments on the first Monday of each month. Ten payments total.

_____ **Plan C:** Weekly - Payments due each Monday. Forty-one payments total.

By signing this tuition agreement, I understand that I must pay my child's tuition on the assigned Monday by 6:00pm. I also acknowledge that if I do not pay on time, I will be charged late fees as explained in The Blue Elephant Parent Handbook.

Child's Name: _____ Date: _____

Parent Name (Printed): _____

Parent Signature: _____

Reminder:

A Supply Fee of \$100 is required for students 12 months and older.
Supply fees will be collected the first Monday in
September and January.



Automated Payment Processing Safe – Convenient – Easy

We are excited to offer the safety, convenience and ease of Tuition Express® — a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR **BANK ACCOUNT** and **CREDIT CARD**

I (we) hereby authorize (business name) _____ to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. _____ (initial) Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

COMPLETE ONE SECTION ONLY

SECTION A (Credit Card)

Cardholder Name	Phone #
Cardholder Address	City State Zip
Account Number	Expiration Date
Cardholder Signature	Date

SECTION B (Bank Account)

Your Name	Phone #			
Address	City State Zip			
Bank or Credit Union Name	Bank or Credit Union Address	City	State	Zip
Routing Transit Number (see sample below)	Account Number (see sample below)	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	
Authorized Signature	Date			

For Official Use Only

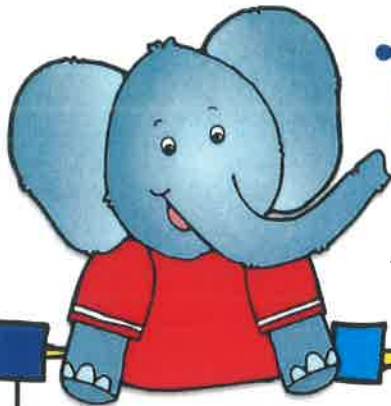
Date Received

Employee Signature

John Sample Mary Sample 123 Nice Street Anytown, USA	BANK OF THE WEST 555-555 5555	00226
Pay to the order of:	Attach Voided Check Here	\$
	Deposit slips not accepted	Dollars
123456789	1800338	0226
Routing Number	Account Number	Check Number

A service of





The Blue Elephant Learning Center



11270 Legacy Drive Frisco, TX 75033 www.TheBlueElephant.com
phone: 469-287-0332 fax: 469-287-0337

Dear Blue Elephant Family,

We are pleased to announce that we have partnered with WatchMeGrow, America's #1 provider of streaming video services for schools, to offer you secure online access to view your child's classroom while he or she is in our care

As the parent of an enrolled child, you create and manage your own account. All data, including your personal login information, is encrypted for your child's security

How do I sign up?

Create your account by visiting watchmegrow.com/signup

Enter our school's phone number: **469-287-0332**

Complete the sign-up form. Here, you'll create your own username and password

What happens next?

FOR YOUR CHILD'S SAFETY, YOU WILL NOT HAVE STREAMING VIDEO ACCESS UNTIL OUR SCHOOL DIRECTOR HAS CONFIRMED YOUR ACCOUNT.

We will confirm and activate your account in 1-2 business days. This step is for your security so that only enrolled families have access to WatchMeGrow. WatchMeGrow will email you when your account is active

How do I start streaming?

From your computer:

Visit watchmegrow.com and click on "Log In" in the upper right corner of the website

From the mobile app:

Download the WatchMeGrow mobile app for iOS or Android

Log in with your username and password **NOTE THAT THEY ARE BOTH CASE SENSITIVE.**

To manage your WatchMeGrow account, visit watchmegrow.com/my-account. Here, you can change your password, add family members, add children, make room changes and more

With love,

Ms. Kelly

WatchMeGrow
Anywhere.

Special Savings



- After 4 weeks of enrollment, families who are in good standing, will receive credit for two weeks of tuition for each child enrolled. Registration fees will also be credited back to the family's school account.
- Any family who chooses to withdraw their child/children within six months from the date of enrollment will be required to pay back the "Special Savings" to TBE. This includes the two weeks of free tuition & the registration fees for each child.

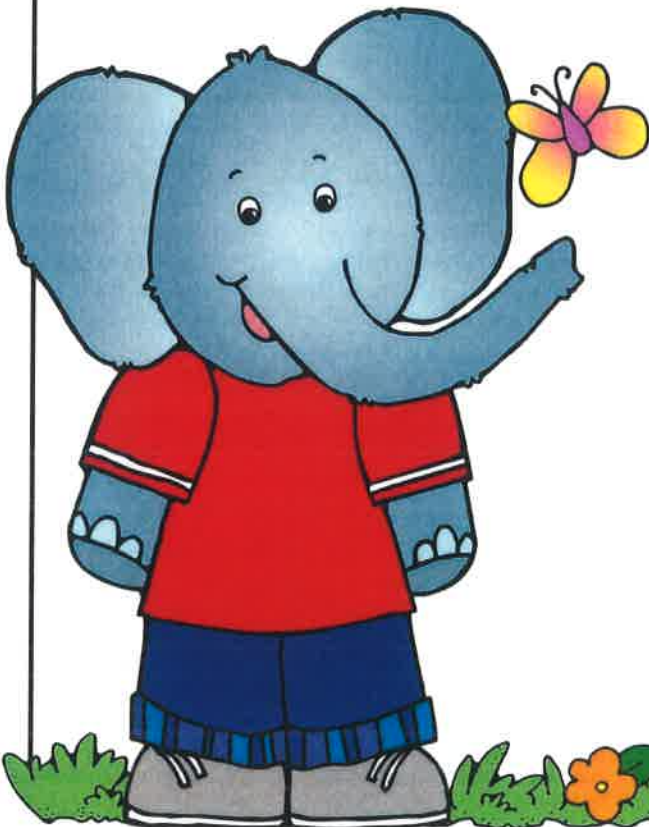
By signing below, I understand the rules and regulations for TBE's Special Savings and will adhere to each one as stated above.

Child's Name:

Parent's Name:

Parent's Signature:

Date:





Dear Families,

Keeping you involved with the school and your child's daily experiences has always been a priority of ours. We are very excited to announce that we are rolling out a program called **Tadpoles!**

From Tadpoles, teachers can send photos and videos to allow you to see a glimpse into your child's day! Teachers will also be creating a daily report for each child. This daily report will keep you informed of the daily activities, learning experiences, and care events for your child each day. All photos, videos, and daily reports are emailed to you directly and you can also access them via the **free** Tadpoles Parent app, available on Apple and Android devices, or online at www.tadpoles.com as well!

To create your account online, please use the following steps:

- Visit www.tadpoles.com and click log in at the top right
- Select Parents on the left
- Choose sign up under "use a tadpoles account"
- Use the email address that is currently on file with our school
 - o If it's a Gmail account, you can sign right in to the account
 - o If it's not a Gmail account, enter your email, choose submit and check your email for the link to establish your password

The same login information will be used to access your account via the **free** Tadpoles Parent app as well.

Tadpoles will continue to strengthen our home-to-school connection. From your Tadpoles parent account, via the app or web, you will be able to enter in morning drop off notes for your child's teachers, mark your child absent, and/or add any additional notes to be communicated to the school.

Each classroom will be equipped with an iPad mini or iPod touch which will be specifically used for the Tadpoles program. If you see a teacher on what looks like a phone or tablet, rest assured, they are only using the device to input information into Tadpoles. The devices are locked down, giving teachers access to only the Tadpoles software.

We consider all information captured within Tadpoles to be a private communication between our school and our families. No personal information is shared with any external parties and as a parent you will only receive information specifically about your child. The confidentiality of all information is maintained through the security features of the Tadpoles software.

We are very excited to begin utilizing Tadpoles and know it will positively impact the engagement of our families and our home-to-school connection. We feel confident that you will love Tadpoles and the level of involvement it allows you to have with your child's daily experiences while at our school. We are happy to answer any questions or concerns you may have about this exciting program!

Thank you!