



COWBOY JUNCTION CHRISTIAN SCHOOL

MICHELLE MARKHAM, ADMINISTRATOR

27502 S. 4380 ROAD - VINITA, OK 74301

(918)256-6100

Preschool Enrollment- 3K-4K

We are now accepting enrollment at Cowboy Junction Christian School for the 2015-2016 school year. Students must be 3 years old by 8-1-15.

Tuition is \$300.00 per month. If your child participates in the after school program, it is an additional \$20.00 per month.

Please complete the following forms, the Enrollment Form and Financial Agreement, After School Program, and Photo Permission form. These need to be completed and returned with \$25; this is the enrollment fee and will also hold your spot. This is non-refundable. We also require a recent picture, a copy of your child's birth certificate and current immunization record. (These forms may already be on file, but please provide a current photo and immunization record) *Incomplete applications will not be accepted.*

We encourage you to return your enrollment forms as soon as possible to secure your child's placement.

If you have any questions, feel free to contact me at 256-6100.

Sincerely,

Michelle Markham



OKLAHOMA DEPARTMENT OF HUMAN SERVICES



Child Information

Child's name		Sex	Date of birth
Name(s) of person(s) and the relationship with whom the child lives			
E-mail address		Area code	Home phone
Home street address	City	State	Zip
Mother/guardian's place of employment		Business, cellular, or page phone number	
Father/guardian's place of employment		Business, cellular, or page phone number	

Emergency contact

In case of emergency, if the parent or guardian cannot be reached, list person(s) to notify, in order of preference:

Name	Phone

Immunization record

Attach a copy of the immunization record or follow the Oklahoma State Department of Health exemption procedures. **Keep your child's immunizations current. Give updated immunization record copies to the child care facility.**

A child two months of age or older cannot be admitted to a child care facility unless the parent presents certification from a licensed physician or authorized representative of any state or local Department of Health that such child has received or will receive immunizations at the medically appropriate time.

Health record

Child's physician or clinic			Phone
Street address	City	State	Zip

Does your child have any individual special needs involving routine care, behavior and guidance, communication, or positioning? If yes, please describe:

Is your child allergic to any foods, medications, etc.? If yes, please describe:

Describe any special precautions for diet, medication, or activity, if applicable:

I give permission to the child care staff to consult with health and child development professionals regarding my child's needs.

Yes ☐ No ☐

Transportation

- I do not give permission for my child to be transported. ☐
- I give permission for this child to be transported: ☐
 - to nearest medical facility, if a medical emergency occurs and I cannot be reached ☐
 - on field trips ☐
 - to and from school – Drop-off time: _____ Pickup time: _____ ☐
 - to and from home – Drop-off time: _____ Pickup time: _____ ☐
 - other, please specify: _____ ☐

Pick up permission

Persons having permission to pick up child:

Name	Phone

I understand this form is supplied by the Oklahoma Department of Human Services (OKDHS) as a service and that supplying the form in no way imposes any responsibility or obligation upon OKDHS.

The Parent's Guide to Selecting Quality Child Care, OKDHS publication number 87-91, and the *Child Care Facility Policies*, are available through your child's child care provider.

Signature of parent/guardian Date

Date child entered facility: _____ Date child withdrawn: _____



Cowboy Junction Christian School

27662 S. 4380 Road
Vinita, Oklahoma 74301
(918) 256-6100

FINANCIAL AGREEMENT, PHOTO PERMISSION, LUNCH, AND BEFORE/AFTER SCHOOL PROGRAM

Student Name: _____

Parent/Guardian: _____

_____ I hereby acknowledge that tuition for Cowboy Junction Christian School is \$275 per month for grades K-8, and \$300 per month for preschool. Part-time preschool is \$200 per month. I understand that I am responsible for the entire amount to be paid before the end of each month. I also understand that a 1% late fee may be imposed to any balance not paid by the 15th of the next month. (The only exception will be for pending tribal or DHS payments.) Co-payments must be paid monthly.

_____ I hereby consent to and authorize the use and reproduction by Cowboy Junction, or anyone authorized by Cowboy Junction, of any and all photographs and/or video images which Cowboy Junction may take of my child.

_____ Cost of lunch will be \$20 per month (K-8 only). If your child wants to bring his/her own lunch, that is fine, but school lunches will cost \$20 per month.

_____ The Before/After School Program hours are from 7:30 a.m. to 5:30 p.m. I understand that the cost is \$20 per month. If my child participates in this program, I agree to pay the additional \$20, and I will have my child picked up no later than 5:30 p.m.

Signed this _____ day of _____, 20____

Parent/Guardian