

EWS Family Data Form 2017-18

Child's Name: _____ Class _____

1. Parent Contract - I have read and understand the information contained in the School Handbook. I agree to abide by all of the policies, terms and conditions set forth in the School Handbook

_____ Parent Initials

2. Choose Payment Option

_____ Prepay Annual Tuition _____ Pay Tuition Monthly (**September 1 to May 1**)

Tuition is due the first of the month prior to service; a three business day grace period is granted before late fee incurs. Returned check fee is \$35.00, late fee is \$25.00.

3. Will you be requesting a tax statement for tuition/fees paid in 2017? _____ Yes _____ No

4. Newsletters and Announcements _____ Email _____ Paper _____ Both

5. Media Release (See attached for full details.) _____ No Usage _____ Unrestricted Usage

_____ Limited Usage (Circle one) Within EWS Educational Material Only Printed Material Only

6. Greeter Program

A section of the parking lot is reserved for parents with younger children to park and walk their preschoolers to their classroom and have their younger children stay in the car under the watchful eye of a staff members. The greeter program is offered from 8:55-9:05 AM and again at 11:55 - 12:05PM. Please keep in mind that a teacher assistant is the greeter and that they are needed in the classroom so a quick drop off or pick up is appreciated. Days of the week I would need the greeter program (please circle):

Monday Tuesday Wednesday Thursday Friday

7. Extended Day Options (Check which options you would like to use)

		<u>Regularly</u>	<u>Occasionally</u>
Early Bird Program	M-F 8:00-9:00AM	_____	_____
Lunch Bunch	M-Th 12-1PM	_____	_____
Kaleidoscope Friday	12-2PM	_____	_____
Extended Day after Lunch Bunch	M-Th (2PM? 3PM?)	_____	_____

Parent/Guardian Signature: _____

Parents Name (printed) _____ Date: _____



EPIPHANY WEEKDAY SCHOOL

5521 Old Mill Road, Alexandria, VA 22309; 703-780-3852
EWS School Year 2017-18

EMERGENCY INFORMATION UPDATE

Child's Name: _____

Parents' Names: _____

Emergency Phone Numbers:

MOM

DAD

(H) _____

(H) _____

(W) _____

(W) _____

(C) _____

(C) _____

Name & Phone of 2 Emergency Contact Persons other than Parent:

1. _____

2. _____

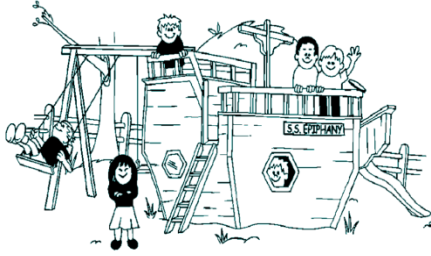
Authorized Pick Up Persons: _____

Medications given daily: _____

Allergies: _____

****Is Epipen required?** _____

Please contact office with names of any family member NOT authorized to pick up your child.



Epiphany Weekday School

5521 Old Mill Road
Alexandria, VA 22309
(703) 780-3852

www.epiphanyweekdayschool.org
ews@epiphanyweekdayschool.org

School Directory Information 2017-18

If you want to be included in the school directory, please check this box and enter the information you want included below.

If you DO NOT want to be included in the directory, please check this box and just list Child's Name.

Child's Name: _____

Parents Names: _____

Siblings Names & Ages: _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____

Mother's Cell Phone: _____

Mother's Email Address: _____ @ _____

Father's Cell Phone: _____

Father's Email Address: _____ @ _____



Parent Media Recording Release Details 2017-2018

Use of children's images includes the display, distribution, publication, transmission or otherwise use of photographs, images and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the **EPIPHANY WEEKDAY SCHOOL** Web Site.

- No Usage:** Deny permission to use my child's image at all.

- Unrestricted Usage:** I give unrestricted permission for my child's image to be used in print, video, and digital media. I agree that these images may be used by **EPIPHANY WEEKDAY SCHOOL** for a variety of purposes and that these images may be used without further notifying me. I do understand that the child's last name will not be used in conjunction with any video or digital images.

- Limited Usage:** Grant permission to use my child's image only in the following ways (mark all that apply):
 - I want my child's image used within the **EPIPHANY WEEKDAY SCHOOL** setting only (not in the larger community).
 - I want my child's image used for educational material only (not marketing). This could be either within **EPIPHANY WEEKDAY SCHOOL** or in the larger community.
 - I want my child's image used on printed materials only (no digital or video use).