



All current forms required by the State of Georgia BFTS to be enrolled in Lighthouse Early Start Academy, Inc./First Steps Infant/Toddler **NOTE: Every form must be completed and signed.**

**Child's Name** \_\_\_\_\_ **DOB/AGE** \_\_\_\_\_ **Today's Date** \_\_\_\_\_

**Form or Item(s) to be returned completed** \_\_\_\_\_ **Staff who received the form** \_\_\_\_\_  
 \_\_\_\_\_ **Date/Staff's Name** \_\_\_\_\_

**Form #**

- 1. Annual \$50.00 Reg.Fee (DFCS Pays \_\_\_\_\_ ) Hours of Care \_\_\_\_\_
- 2. Sign In Code # \_\_\_\_\_ **BRIGHTWHEEL** \_\_\_\_\_
- 3. **FORM #3** Completed Enrollment Application (2 contacts) \_\_\_\_\_  
**NonDiscrimination Information on back application**
- 4. Doctor's Name & Phone # listed on **Enrollment FORM #3** \_\_\_\_\_
- 5. **FORM #4** Parent Agreement (Make parent a copy) \_\_\_\_\_
- 6. **FORM #5** (Front & Back) Auth. For Emer. Medical Care \_\_\_\_\_  
**B. FORM #6B** Authorization to use External preparations \_\_\_\_\_
- 7. **FORM #7** CACFP Infant Feeding Plan (signed/dated-*POST over child's bed*) \_\_\_\_\_
- 8. **ITEM #8** Current Form 3241 Immunization (*Input info in Procure/BRIGHTWHEEL*) \_\_\_\_\_
- 9. **ITEM #9** Copy of Medicaid/Peach/Insurance Card \_\_\_\_\_
- 10. **FORM #10** CACFP Income Eligibility (# \_\_\_\_\_) Complete immediately \_\_\_\_\_
- 11. **FORM #11** CACFP Milk Affidavit & **CACFP PARENT Letter** \_\_\_\_\_
- 12. **Assessment:** ASQse3 Online/CDC Checklist (**within first 30 days**) \_\_\_\_\_
- 13. **NAME:** Info on Roster, Folder , Cubby, Table/Bed/Mat with #Number (See #10 Above) # \_\_\_\_\_

**FORMS FOR PARENTS TO RECEIVE AND KEEP** \_\_\_\_\_ **When staff explains each** \_\_\_\_\_  
**\*Explained to Parent** \_\_\_\_\_ **area, check the line.** \_\_\_\_\_

- 14. Policies & Procedures (2 weeks notice)/Signed/located in the lobby \* \_\_\_\_\_
- 15. CACFP WIC Flyer/Eligibility/Build Future/ALL CACFP Forms \* \_\_\_\_\_
- 16. Safe Sleep, Inclusion, Current School's Calendar, Website, Social Media \* \_\_\_\_\_
- 17. **LOCATION:** Parent's Board & E-mail Information when checking in/out \_\_\_\_\_

**ITEMS FOR PARENTS TO BRING AND LABEL** \_\_\_\_\_ **When staff explains each** \_\_\_\_\_  
**\*Explain to Parent** \_\_\_\_\_ **area, check the line.** \_\_\_\_\_

- Wipes & Fresh Labeled Bottles-Daily \* \_\_\_\_\_
- Milk/Water/Cereal/ Pampers/Pull-Up- Labeled \* \_\_\_\_\_
- 2 sets of seasonal changing clothes- Labeled \* \_\_\_\_\_
- Two towels or blankets-Labeled \* \_\_\_\_\_
- Picture Release form...Show-N-Tell Form/Social Media \* \_\_\_\_\_

**ITEMS FOR STAFF TO DOCUMENT**

**CAPS Certificate:** Date to start: \_\_\_\_\_  
**PAYMENTS: NO CASH**  
 Paypal, Bill Pay, Ck/M.O., BrightWheel  
 CAPS/HATS Amount \_\_\_\_\_  
 Parent Pays Amount \_\_\_\_\_  
 Tuition Envelope Locations \* \_\_\_\_\_

**EXIT**

- 1. All child's items to parent \_\_\_\_\_
- 2. Written notice in folder \_\_\_\_\_
- 3. Weekly folder returned \_\_\_\_\_
- 4. Tuition balance paid \_\_\_\_\_
- 5. Submit folder to Mrs. Jewell \_\_\_\_\_

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

**Date** \_\_\_\_\_

**Staff signature** \_\_\_\_\_

**Director's signature** \_\_\_\_\_ June2017