



**Atlee Christian Academy**  
**Hanover Church of the Nazarene**  
**8391 Atlee Road, Mechanicsville, VA 23116**  
**www.aca.hanoverlife.com / 746-3900**  
*Lead Pastor: Gregory K. Norwood*  
*Principal: Cheri Brown*  
*Preschool & After School Director: Heather Pederson*

**Nurturing**  
**the**  
**Whole**  
**Child**  
*Mind, Body, and Spirit*

Child:	Nickname:	Date of Birth:	Sex:
Address:	City:	Zip:	Home Phone:
Chronic Physical Problems / Pertinent Development Information / Special Accommodations Needed:			
Previous Child Day Care Programs and Schools Attended:			
If Child Attends this Center and Another School/Program, Give Name of School/Program		Grade:	
<b>PARENT(S) / GUARDIANS(S)</b>			
Father:	Place Employed:	Business Phone:	
Street Address:		Home Phone:	
City, State & Zip		Email:	
Mother:	Place Employed:	Business Phone:	
Street Address:		Home Phone:	
City, State & Zip		Email:	
Person(s) or Agency Having Legal Custody of Child		Cells: (M) (D)	
Home Address:		Home Phone:	
Business Address:		Business Phone:	
<b>EMERGENCY INFORMATION</b>			
Allergies or Intolerance to Food, Medication, etc., and Action to Take in an Emergency:			
Child's Physician:		Phone:	
Two People To Contact if Parent(s) Cannot Be Reached:		Address:	
1.	1.	Phone:	
2.	2.	1.	
Person(s) Authorized to Pick Up Child:			
Person(s) NOT Authorized to Pick Up Child*			

\*Appropriate paperwork such as custody papers shall be attached if a parent is not allowed to pick up the child.  
 (over)

**AGREEMENTS**

1. The child day center agrees to notify the parent(s) / guardian(s) whenever the child becomes ill and the parent(s) / guardian(s) will arrange to have the child picked up as soon as possible if so requested by the center.
2. The parent(s) / guardian(s) authorize the child day center to obtain immediate medical care if any emergency occurs when the parent(s) / guardian(s) cannot be located immediately. \*\*
3. If in the event you find it necessary to withdraw your child, 30 day notice is required. If no notice is given, you will be charged for the month.

**SIGNATURES**

<i>Parent(s) or Guardian(s)</i>	<i>Date</i>
<i>Administrator of Center</i>	<i>Date</i>

\*\*If there is an objection to seeking emergency medical care, a statement should be obtained from the parent(s) or guardian(s) that states the objection and the reason for the objection.

**OFFICE USE ONLY**

**IDENTITY VERIFICATION**

If proof of identity is required and a copy is not kept, please fill out the following.

Place of Birth:	Birth Date:	Birth Certificate Number:	Date Issued:
Other Form of Proof	Date Documentation Viewed	Person Viewing Documentation	

Date of Notification of Local Law-Enforcement Agency (when required proof of identity is not provided): \_\_\_\_\_  
*Date*

Proof of the child's identity and age may include a certified copy of the child's birth certificate, birth registration card, notification of birth (hospital, physician or midwife record), passport, copy of the placement agreement or other proof of the child's identity from a child placing agency (foster care and adoption agencies), record from a public school in Virginia, certification by a principal or his designee of a public school in the U.S. that a certified copy of the child's birth record was previously presented or copy of the entrustment agreement conferring temporary legal custody of a child to an independent foster parent. Viewing the child's proof of identity is not necessary when the child attends a public school in Virginia *and* the center assumes responsibility for the child directly from the school (i.e., after school program) or the center transfers responsibility of the child directly to the school (i.e., before school program). While programs are not required to keep the proof of the child's identity, documentation of viewing this information must be maintained for each child.

**REGISTRATION FEES**

*(registration fees are non-refundable)*

**Preschool:**

2 & 3 Day Programs	\$70
5 Day Programs	\$85 reg. fee (book fee—\$58)
Kindergarten	\$100 reg. fee (book fee - \$96)
1st Grade	\$100 reg. fee (book fee - \$170)
2nd Grade	\$100 reg. fee (book fee—\$165)
3rd Grade	\$100 reg. fee (book fee—\$158)
4th Grade	\$100 reg. fee (book fee—\$160)
5th Grade	\$100 reg. fee (book fee—\$160)

**Program I Am Interested in:**

- \_\_\_\_\_ 2 Day Program (\_\_\_\_\_ age of child)
- \_\_\_\_\_ 3 Day Program (\_\_\_\_\_ age of child)
- \_\_\_\_\_ 5 Day Program
- \_\_\_\_\_ Elementary School (\_\_\_\_\_ grade)
- \_\_\_\_\_ After-School Program

**After-School Program:**

Fee     \$60