



Official Registration Package 2012-2013

The following forms are due by August 15th.

- Registration Form
- \$50.00 non-refundable registration fee
- Parent Contract
- Emergency Medical Permission Form
- Parent Interest Form

Please return the above forms and \$50 registration fee to:

ICNS Registrar:
Heidi Bishop
141 Chadwell Road
Rochester, NY 14609

This \$50 non-refundable application fee reserves your child's place at ICNS for the school year indicated on the form. All other forms need to be included to complete the Registration process. Enrollment is not complete until all forms are returned to ICNS, no later than August 15th.

The following Health forms are due before the child can begin the school year.

- Assisting Parent Health Form
- Child Medical Exam Form
- Please feel free to call me with any questions.....Heidi Bishop at 288-8308.



Registration Form

School Year: 20____ to 20____ **2 day class (T/Th)**____ **3 day class (M/W/F)**____

Are you interested in ICNS's Partial Buy-Out Program? Yes _____ No _____

Child's Name: _____ Nickname: _____

Date of Birth: ____/____/____ Boy _____ Girl _____

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

Address: _____
Street City, State & Zip

Phone(s): _____

Email Address: _____

Can we share this email with your class? YES _____ NO _____

Father's Employer: _____ Phone: _____

Mother's Employer: _____ Phone: _____

Brother and sisters in Family:

Name/DOB: _____ Name/DOB: _____

Name/DOB: _____ Name/DOB: _____

How did you learn about ICNS? _____

Is someone in addition to or other than a parent going to assist in the classroom?

Yes _____ No _____ If yes, please give name, relationship, address & phone number

Mother's Signature: _____

Father's Signature: _____



Irondequoit
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Parent Assisting Information & Availability Form

Parent Name: _____

Child: _____

Child Allergies: _____

If you want to assist on your child's birthday, indicate date: _____

Specific date(s) you would like to assist (holidays): _____

Date(s) you cannot assist: _____

Specific weekday(s) that is inconvenient for you to assist: _____

Name(s) of person(s) car pooling with: _____

Parent's hobbies, interests, musical talent, skills: _____

If you are unable to assist on your scheduled day, you are responsible for finding a substitute as far in advance as possible. We plan to have a list of emergency substitutes for those mornings that an emergency may arise (sick child, etc...).

_____ I will be an emergency substitute (An emergency sub does not assist more, but they are available "on call" to switch days)



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Assisting Health Statement

I find _____ to have no illness that would make it inadvisable for her (him) to have contact with children in a nursery school.

Signed* _____ Dated: _____

Assisting Tuberculin Test

This is to certify that _____ received a chest x-ray or tine test on _____, and the results of that test were (circle one) POSITIVE NEGATIVE

Signed* _____ Dated: _____

*Physician please sign and use stamp below signature.

Emergency Medical Permission

Child's Name: _____ Date of Birth: _____

Address: _____ Home Phone: _____

Father's Name: _____ Work Phone: _____

Mother's Name: _____ Work Phone: _____

Pediatrician: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Type of medical insurance coverage and policy number: Circle one:

Blue Choice / Blue Cross/Blue Shield / GVGHA (Wilson Health Ctr.) /

RHN (Rochester Health Network) / Preferred Care / Other: _____

Policy #: _____

Special medical or emergency instructions:

Please list any food allergies here, and ALSO notify the teacher directly: _____

Pediatrician's Hospital Affiliation: _____

I give my permission for my child to receive emergency medical treatment.

Print Name: _____

Signature: _____ Date: _____



Irondequoit Cooperative Nursery School

121 Scholfield Road
Rochester, NY 14617
342-8190

Parent(s) Contract

This contract, between Irondequoit Cooperative Nursery School (ICNS), 121 Scholfield Rd., Rochester, NY 14617 and

Parent(s): _____

Address: _____

Street & Apt. No.

City

State

Zip

is entered on _____ for the purpose of joining ICNS and having their child

Date of Contract

_____ be enrolled in ICNS.
First MI. Last

ICNS is administered by the parent(s) of the enrolled children and provides an educational program developed and implemented by a professional teacher, in consultation with the ICNS Board. ICNS will provide a TEACHER appropriately certified in the state of New York, or an appropriate substitute in cases of TEACHER absence, for the class days and times offered during the period of enrollment. ICNS holds classes beginning in September and ending in May. Classes meet as follows (except holidays and school vacation days):

Two-Day Class: Tuesday and Thursday from 9:00-11:30am
(Three years old by December 1st of school year)

Three-Day Class: Monday, Wednesday and Friday from 9:00-11:30am
(Four years old by December 1st of school year)

In consideration of enrolling the PARENTS' child in ICNS for the **20** ___ to **20** ___ school year and services rendered to the PARENT(S) of the enrolled child during the period of enrollment, the PARENT(S) agree to fulfill their obligations to the ICNS as follows:

I. Cooperative Responsibilities of the Parent

- a. I/We agree to assist in the classroom on a rotating schedule in equal proportion to all other families. The actual number of assisting days will depend on final enrollment

numbers. Assisting consists of arriving by 8:40 am to help set up the classroom for the day's activities and staying after all the children have been released to help clean up. Failure to abide by the assisting schedule will result in penalties as outlined in Section III.

- b. I/We accept responsibility for one school job for the year. Job selection is subject to availability and approval by the School Board. Failure to accept a job by the first day of school will result in a fine as outlined in Section III and a job will be assigned to you by the School Board.
- c. I/We agree to attend all (maximum of 5) mandatory parent-only meetings throughout the school year. These meetings are held outside of regular school hours. An unexcused absence from a mandatory parent meeting will result in penalties as outlined in Section III.
- d. I/We agree to attend a mandatory training session. All family members who will be assisting in the classroom must attend this training session. An unexcused absence from a mandatory training session will result in penalties as outlined in section III.
- e. I/We agree to perform housekeeping duties 1 to 2 times per school year according to the rotating weekly schedule established by the Housekeeping Coordinator.

II. Financial Responsibilities

- a. I/We agree to pay the non-refundable \$50 application/registration fee.
- b. I/We agree to pay tuition in three installments according to the schedule below, and that late charges will be applied as outlined in Section III:

Due Date	2 Day Class	3 Day Class
August 15 th	\$214	\$287
October 15 th	\$213	\$287
February 15 th	\$213	\$286

- c. I/We agree to participate in all mandatory fundraisers, not to exceed three separate fundraisers. The School Board will set the minimum fund raising level for each fundraiser.
- d. I/We understand that tuition is non-refundable. Refunds on a case-specific basis will be considered for reason of loss of job, transfer out of town, serious illness, death, or teacher recommendation. These requests will be considered by the ICNS Board and would then only be given upon enrollments of a replacement child acceptable to ICNS. Refunds, if any, would be pro-rated effective on the date the replacement child enrolls, or as determined by the ICNS Board.

III. I/we agree with the fine schedule outlined below:

Arrival after 8:40 am on Assisting Day	1 st Offense – Written Warning
Arrival after 8:40 am on Assisting Day	2 nd Offense - \$25 Fine
Arrival after 8:40 am on Assisting Day	3 rd Offense - \$50 Fine

No Show on Assisting Day	\$50 Fine
Failure to accept a job by school opening	\$25 Fine & a job will be assigned to you
Unexcused absence from Parent Meeting/ Training Session	\$25 Fine
Tuition Late Charges	\$10 per week
Bad Check Fee	\$35

- IV. I/We give permission for my child to go on all field trips for the school year. I further understand that if I cannot attend a field trip, it is my responsibility to make arrangements for another responsible adult to provide transportation and supervision for my child. I will provide an age appropriate child safety seat for the trip.
- V. I/We give permission for ICNS to release my child's picture and name to local newspapers and use on our website.
- VI. I/We understand that my child will only be allowed to attend class after all Health Forms are received by the Health & Safety Coordinator.
- VII. I have read, understand, and agree to abide by the Constitution and Bylaws of Irondequoit Cooperative Nursery School and all items included in this contract. I understand that failure to meet my financial or cooperative responsibilities may result in expulsion from the school.
- VIII. This contract becomes effective after the PARENT(S) and ICNS Registrar (or Chairperson) has signed below and Registration fee is paid. It remains effective for the school year designated previously. It may be terminated by mutual consent of PARENT(S) and ICNS Board.

Parent #1: _____ Date: _____

Parent #2: _____ Date: _____

Registrar: _____ Date: _____

Please return this form to the registrar. You will receive a copy for your records.



Parent Job Interest Form

Listed below you will find the different board, trustee and non-board positions available. Every position comes with a notebook that includes more detail for your job and past notes/ideas from previous families. These will be handed out at the first parent meeting. Please feel free to contact the vice chairperson if you have any questions about a particular position. Please indicate your 1, 2 and 3 choices for the position that you are interested in holding during the next school year.

Board/Trustee Positions

_____ Chairperson- oversees all school operations. Serves as the liaison with the church, directs all communications, runs board & parent meetings and plans school calendar.

_____ Vice-Chairperson- Assigns positions, updated & distributes notebooks, assist the Chair in administration of ICNS.

_____ Registrar- Recruits new families, registers families and collects tuition. Plans open house(s) and follow-up activities.

_____ Treasurer- Responsible for receipt and disbursement of funds, maintains insurance policy, submits payments to outside agencies, manages & makes recommendations on fiscal matters. Prepares monthly internal report for board/parent meetings. Oversees payroll.

_____ Finance Chairperson- Assists Chairperson and Treasurer in managing and monitoring finances and taxes for ICNS. Assists Ways & Means Chairperson in fund raising activities as needed.

_____ Ways and Means- Coordinates fundraisers throughout the year. Oversees United Way allocations.

_____ Publicity- Writes and submits articles & photographs to local media summarizing ICNS activities, events, fundraisers and field trips. Composes advertisements to local media as requested (work w/ website coordinator) Displays copies of printed articles.

_____ Equipment Chairperson- Responsible for equipment committee (Playground Coordinator, Classroom Equipment Coordinator and Housekeeping Coordinator) which maintains all school equipment and furnishings. Maintains ICNS inventory of property and maintenance supplies.

_____ Recording Secretary- Records minutes of all board and parent meetings, distributes previous minutes at board meetings and assists with occasional typing as needed. Writes thank you notes as needed.

Non-Board Positions

_____ Assisting Scheduler (2)- Organizes and issues parent assisting schedules in September and January. Set up and implements phone tree to call parents in case of emergency or needed information.

_____ Field Trip Planner (2)- Coordinated with teacher and parents to organize in-class and out of school field trips.

_____ Special Projects- Along with the teacher, plans and implements special classroom projects such as chick hatching, nature/science projects and school pictures.

_____ Librarian- Maintains ICNS libraries(parent/child), responsible for indexing new books. Also distributes and organizes monthly book orders through Scholastic.

_____ Health & Safety Officers- Works with Registrar to distribute, collect and report (as required) all necessary health and medical forms for parents, children and teacher. Coordinates fire safety inspection and fire drills. Assists chairperson as requested on ICNS health and safety topics.

_____ Playground Coordinator- Responsible for working with Equipment Chair to take care of playground and yard.

_____ Classroom Equipment Coordinator- Work with Equipment Chair to maintain, repair and replace school equipment and furnishings.

_____ Housekeeping Coordinator- Schedule parents for ICNS weekly cleaning, supervises fall work party, put away party and special cleaning needs. Assists teacher in keeping the classroom clean and organized throughout the year.

_____ Community Services Coordinator- Researches and coordinates school participation in community events (like the Memorial Day Parade, etc.) and in community projects. Helps teacher in organizing the community projects the children take part in like the blanket drive, clothing drive, etc.

_____ Website Coordinator- Maintain and updates ICNS website as needed.

_____ Photographer/Yearbook- Coordinates all pictures taken during the year and makes a yearbook. Coordinates with ICNS families for purchases and distribution of the yearbook.

_____ Social Committee Chairperson- Organizes out of school family and parent events such as fall picnic, holiday cookie decorating and spring events.

_____ Hospitality- Arranges for refreshments at parent meetings and work parties. Responsible for set up and clean up at mentioned events.

