

**REGISTRATION PACKET
2012-2013**



Dear Oswego Playschool Parents,

On behalf of Oswego Playschool, I would like to extend a hearty welcome to new families joining our OP community as well as to our returning families.

We are very excited to have Teenie MacLeod as our teacher. She has over 18 years experience working in a cooperative setting as both a teacher and a parent. We are very fortunate to have such a gifted teacher working with our children. Her love, enthusiasm and nurturing personality are highly contagious among the students and families involved in Oswego Playschool.

To reserve a space for your child, please fill out and return the enclosed forms. Please also include the **non-refundable \$100.00 registration fee (checks only please)**. We will reserve a space for your child when we receive the registration fee and all the necessary paperwork. Enrollment is on a first come, first served basis. A waiting list is provided when enrollment exceeds the maximum enrollment figures – sixteen (16) children for the 2-day class and eighteen (18) children for the 3-day class.

The 2-day class is offered Tuesday and Friday from 9:30am-12:00pm.

The 3-day class is offered Monday, Wednesday, and Thursday from 9:30am-12:00pm.

Children must be three years old and toilet-trained to participate in our school. We recommend the 2-day class for 3 year olds and the 3-day class for 4 year olds.

* Please see the fee schedule for our tuition fees and other financial obligations.

The following items are required to ensure enrollment (or quick placement on the waiting list):

- ✓ Registration Form
- ✓ Parent Agreement Form
- ✓ Background Check Forms
- ✓ Job Preference Form
- ✓ \$100 Registration Fee (non-refundable)

Please fill out each form completely and sign each form as required.

Completed forms can be mailed to: Oswego Playschool
VP Membership
516 8th Street
Lake Oswego, OR 97034

Thank you for your interest in our wonderful school – here's to another great year!

Sincerely,

Kim Hunt
Vice President of Membership
(503) 636-1345

**PROJECTED
FEES / RESPONSIBILITY
SCHEDULE
2012-2013**



The following items are required for each family attending Oswego Playschool. The registration fee is non-refundable.

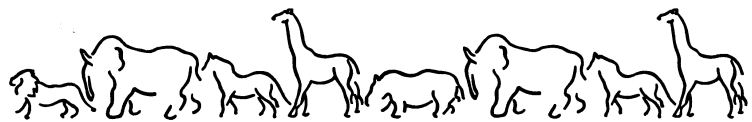
<u>DUE DATE</u>	<u>AMOUNT</u>	<u>DESCRIPTION</u>
at Registration	\$100	Registration Fee
at New Parent Night (May 17, 2012)	\$115 \$150	May Tuition 2-day Families May Tuition 3-day Families
1 st school day	\$157.50	2-day class \$57.50 Sept Tuition \$100 *Participation Deposit
1 st school day	\$175.00	3-day class \$75.00 Sept Tuition \$100 *Participation Deposit
1 st of each month	\$115	2-day Monthly Tuition
1 st of each month	\$150	3-day Monthly Tuition

There is no fundraising requirement for families attending Oswego Playschool.

<u>TIME FRAME</u>	<u>MANDATORY JOB DESCRIPTION</u>
All school year	Parent Job- The yearlong Parent Jobs are required of every co-op family and allow for the smooth daily operation of the playschool.

*A deposit of \$100 will be collected per family (not per child) before the child begins school, to ensure full participation in all school events, which include but may not be limited to all Parent Help Days as scheduled, all three General Meetings, and at least one of the three scheduled School Clean-Up days (or 4 hours per family) as scheduled in the school calendar. In the event of family or medical emergency, families may arrange with the Teacher and/or President to make-up missed General Meetings by attending a Parent Child Preschools of Oregon (PCPO) workshop or other approved parent education related class, training or lecture. The deposit will be refunded at the end of the school year (or rolled-over if enrolling in a 2nd year), upon completion of the above requirements. In the event that a family does not attend required meetings or arrange an acceptable substitute that family's \$100 deposit will be forfeited to the school. In the event a family withdraws early from school, the deposit is refundable, if the above conditions have been met.

Registration Form
2012-2013



Oswego Playschool

Founded in 1953

Child's Last Name		First	Middle	Preferred Name	Girl or Boy (please circle)
Street Address		City	State	Zip Code	Phone Number
Birth date	Child's Immunizations Up-To-Date? YES NO	Other Preschools Attended			

Mother's Last Name		First	Middle	Occupation	
Street Address (if different)		City	State	Zip Code	
Father's Last Name		First	Middle	Occupation	
Street Address (if different)		City	State	Zip Code	

Mother's Home Phone Number	Work Number	Cell Phone Number
Father's Home Phone Number	Work Number	Cell Phone Number

Email Address (s) (used for school related information and notifications)

IN CASE OF EMERGENCY - Child's Doctor	Phone Number
Neighbor or Close Friend	Phone Number
Neighbor or Close Friend	Phone Number

Names and Birth dates of Other Children in Your Family	
How Did You Hear About Oswego Playschool	
Parent Signature	Date

School Job Preference

Child's Name:	Class (circle one): 2 Day/3 Day
Parents' Names:	Phone Number:

Please indicate top 3 jobs you would be most interested in for next year by putting a **1, 2,** or **3** in the appropriate column with **1** being the job you most prefer. Also, mark an **X** in the appropriate column on any job that you would consider. We will do our best to accommodate your job preference.

Note that the Board meets once per month and these members are required to attend these meetings. Please be sure you can meet this commitment, or select one of the other Non-Board positions.

	JOB TITLE	Top 3 Preferences	Would Consider
Executive Board Jobs	President		
	Treasurer		
	Secretary		
	Fundraising VP		
	Membership VP		
	Maintenance VP		
Non-Executive Board Jobs	2-Day Class Representative		
	3-Day Class Representative		
	Parent Education Coordinator		
	Newsletter		
	Website		
	Public/Alumni Relations		
Non-Board Jobs	Dramatic Play		
	Paint/Playdough/Sensory-Water Table		
	Student Portfolio-Scrapbook		
	Teacher Assistant		
	School Photographer		
	Supplies		
	Fundraising Assistant		
	Fundraising Committee Member		
	Grant Writer		
	Membership Assistant		
	Health & Safety		
	Groundskeeper		
	Laundry		
	Animal Care		

**PARENT AGREEMENT FORM
2012-2013**



School Copy

- As a member of Oswego co-op Playschool, I will read carefully and be responsible for knowing the by-laws and policies of this school.
- As a parent helper, I will arrange to arrive 15 minutes before school opening and to stay until cleanup is completed after school closing. So that both my child and I may get the most out of this very special day, I will not bring any other children to the playschool. If I cannot be present, I will trade parent help days with another parent, notify the teacher, and record the change on the master schedule as soon as possible. If I have an emergency situation or if I am very ill and unable to do the calling myself, I will contact my Class Representative who will try to find a sub for me.
- In addition to parent helping, I will be responsible for a school job of my choice for each child enrolled. For those families with three children enrolled, a maximum of two full jobs will be required. If a parent's obligations are not met (i.e., parent helping, attendance at General Meetings, prompt tuition payment, four hours of school clean-up), the child may be dropped from the school. Keep in mind that this is a cooperative school and it means just that. You, the parents, run the school and in order to function efficiently, the cooperation of every single member is absolutely essential.
- I will learn and follow the proper procedure for signing my child, as well as children in my carpool, in and out of school. I will learn and follow the correct procedure when someone other than me (grandparent, sitter, etc.) will be picking my child up from the playschool. I will provide a list of people authorized to pick up my child in the event of an emergency or illness. In these cases, verbal authorization from the parent to the teacher will be required. If the correct procedure is not followed, the teacher has my permission not to release my child.
- I will participate in four hours of school clean-up.
- I understand that, in the schoolroom and on the playground, the teacher has overall responsibility for the program, methods, discipline and health and safety measures. On a parent-help day, the parent is there as the teacher's assistant.
- I will direct queries or suggestions about the administration of the playschool to the Executive Board through the President or Class Representative.
- I will keep the teacher informed of any event or change of routine at home which might affect my child's behavior.
- I will adhere to the schools' written policy regarding illness.
- I understand that Oswego Playschool is required by law to conduct background checks on all parent and other volunteers who assist with the operation of any Preschool program. If I plan to parent help in the classroom, drive children to/from a field trip, or volunteer in other classroom activities I will complete and submit to the Oregon Department of Education (the "ODE") the documentation required by the ODE for a background check.
- I hereby authorize the teacher to: (a) Send my child home, if I am unable to pick him/her up, accompanied by an adult approved by me, if he/she appears ill, when it has been verified there is someone home to receive him/her; (b) In case of a serious injury or other medical emergency, obtain professional help (family doctor and/or ambulance) and notify the parents immediately. If parents cannot be reached, contact is then made with the person whose name appears as alternate on the registration form.
- I will be prompt in bringing my child to school and in picking him/her up after school closing.
- Upon enrollment, I understand that I will become a member in the Parent Child Preschools of Oregon Association.
- I will attend all General meetings held at the playschool for the purpose of conducting school business and the parent education program. I understand that the presence of one parent per family is expected at the meeting. I am aware that contact with the Secretary is required in the event of an unavoidable absence, and that the posted minutes of the meeting missed should be read.
- I will pay my child's tuition and fees according to the procedures outlined in the rules and regulations.
- If it becomes necessary to withdraw my child from school, I will give one month's notice in writing to the Membership Chairperson, or pay one month dues in lieu of notice.
- I understand that my child shall not be permitted to attend school until the following have been completed and presented to the Membership Chairperson: Parent Agreement Form, Medical Emergency Form, registration fee paid, the first and last month's tuition paid, and the state required Immunization Form.

SIGNED: _____
Parent or Guardian Date

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2012-2013**



Parents' Copy

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ACKNOWLEDGEMENT AND RELEASE OF ALL CLAIMS

I wish to volunteer at the Oswego Playschool (the "Preschool") and understand that the Preschool, in conformance with its policy, will request that the Oregon Department of Education perform a criminal background check on me as a condition of my volunteering for the Preschool. I understand that volunteering is a privilege and that the decision of whether to allow me to participate is completely within the discretion of the Preschool and its designated authorities. In consideration for the opportunity to volunteer for the Preschool, I hereby release for myself, my spouse, my heirs, executives, and assigns, completely release and discharge the Parent-Child Preschools of Oregon (the "PCPO"), the Preschool, their Boards, officers, employees, and agents and their respective heirs, executors, and assigns from any and all claims, rights, demands, actions, obligations, causes of action of any and every kind, nature, and character, known or unknown, that I may have against any of them arising from or in any way connected with my relationship with them relating to the policy or the execution of my background check.

(Signature)

Name (printed): _____

Home Address: _____

CRIMINAL HISTORY VERIFICATION OF APPLICANTS

Please type or print clearly.

As Appears on License

Name: _____ Date of Birth: _____ Sex: _____
Last/First/Full Middle MM/DD/YY

List Other Names Previously Used: _____

Social Security No.: _____ Oregon Driver License/Identification Card No.: _____

Providing your social security number on this form is voluntary. If you choose not to disclose the social security number, this will not be a basis for denial of employment or any rights, services or benefits to which you are otherwise entitled. If you do provide the number the Oregon State Police will use it as an additional identifier to search for any criminal record you may have. Your social security number will be used as stated above. State and federal laws protect the privacy of your records.

Address: _____
Full Street Address

City: _____ State: _____ Zip + 4: _____

A. Have you **EVER** been convicted of a sex-related crime? [] Yes [] No

If yes, was the conviction in Oregon or another state? (Please specify if another state.) State: _____

If yes, did the crime involve force or minors? [] Yes [] No

B. Have you **EVER** been convicted of a crime involving violence or threat of violence? [] Yes [] No

If yes, was the conviction in Oregon or another state? (Please specify if another state.) State: _____

C. Have you **EVER** been convicted of a crime involving criminal activity in drugs or alcoholic beverages. [] Yes [] No

If yes, was the conviction in Oregon or another state? (Please specify if another state.) State: _____

D. Have you **EVER** been convicted of any other crime except a minor traffic violation?(Includes Traffic Crimes) [] Yes [] No

E. Have you been arrested within the last three years for a crime for which there has not yet been an acquittal or dismissal? [] Yes [] No

Advisory: A check of the applicant's criminal history will be made by the Oregon Department of Education to verify the responses to the preceding questions.

I hereby grant to the Oregon Department of Education permission to check civil or criminal records to verify any statement made on this form. Regardless of whether the applicant grants consent, the Oregon Department of Education will conduct a criminal offender record check of applicants for the position of school bus driver, volunteer, or other prospective school employees working with or around children. The applicant is entitled to review his/her criminal history for inaccurate or incomplete information. Discrimination by an employer on the basis of arrest records alone may violate federal civil rights law. The applicant may obtain further information concerning the applicant's rights by contacting the Bureau of Labor and Industries, Civil Rights Division, State Office Building, Suite 1070, Portland, Oregon 97232, telephone 503-731-4075.

I acknowledge reading and the receipt of this notice.

Applicant's Signature: _____ Date: _____

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(Signature)

Name (printed): _____

Home Address: _____

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As Appears on License

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Full Street Address

City: _____ State: _____ Zip + 4: _____

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