



PHOENIX KIDS CLUB LLC.
Enrollment Checklist

Enrollment Checklist:

- Membership Enrollment Package: _____
- Parent's Driver License / Identification Card: _____
- Child's Immunization Record: _____
- Child's Birth Certificate: _____

Notes / Missing Items:



PHOENIX KIDS CLUB MEMBERSHIP GUIDELINES

Welcome to your Phoenix Kids Club Membership. As a valued member of PKC, you are granted many perks that the standard childcare providers do not allow. The Phoenix Kids Club Membership is a month to month membership with the option of a weekly rate. There are three (3) levels to our membership: Silver, Gold, and Platinum. As a PKC Kid, your child will have full access to all of our services offered based on the membership you've chosen. Below is a list of all of the perks of being a PKC Member, please see membership type for full details of what's included in your membership:

Includes:

- Premium Childcare (All)
- Breakfast, Lunch, Dinner, and Snacks (All)
- Interactive Fun Activities (All)
- All shifts Access (Platinum)
- Discounted Local field trip participation / extracurricular activities (Platinum)
- \$10 Souvenir Voucher (Gold)
- \$20 Souvenir Voucher (Platinum)
- Homework Assistance Program
- No late fees up to 1 hours after scheduled pick-up. **Must give notice at least an hour before scheduled pick up.** (Gold and Platinum)
- Additional Work Schedule Accommodations up to one (1) hour (Gold and Platinum)

Below are the perks included and the limitations for each benefit. Please be sure to initial every section after carefully reading.

_____ Premium Childcare

The Premium Childcare Service provides you with peace of mind. We tend to the basic and additional needs of your child. This includes adult supervision, feeding, cleaning, and ensuring your child's safety.

_____ Breakfast and Snacks

Mealtime is one of the most important times of the day. We exercise healthy eating habits and encourage our kids to eat food that fuels and nourishes their growing minds. As a PKC member, your child will have free breakfast and have access to unlimited snacks each day they are in our care.

_____ Interactive Activities

We enjoy learning and having fun, so we are always incorporating new and exciting ways to help your child learn, think, and grow.

Drop Off Anytime

Don't worry about where you're going to find a babysitter at the last minute. We are here to help. Simply give us a call, let us know what shift you desire your child to participate in for the day and we will be here ready to serve you. No more having to miss work because you don't have a babysitter. No more having to search high and low for a sitter when you want to have some me time, let your hair down, or enjoy a date with bae. As a PKC Member, your child is welcome at any time of day or night without worries. *See pricing sheet for pricing details.*

Limitations: The time span must not exceed the 12-hour max time given per shift. For instance, if you drop your child off at 6:00AM, you must pick your child up by 6:00PM unless communication has been established and approved for a later time.

Local Field Trip Participation / Extracurricular Activities

Here at the Phoenix Kids Club, we love to have FUN! As a PKC Member, you and your child are welcomed to join us on any of our local trips and extracurricular activities. These activities include, but are not limited to:

- Phoenix Kids and Parents Game Nights
- Phoenix Kids and Parents Movie Night
- Phoenix Kids Picnicking in the Park
- Phoenix Kids and Parents Skating Fun
- Phoenix Kids and Parents FireBall Carnival
- Monthly PKC Laser Tag (Coming Soon)

Limitations: These limitations consist of age appropriation. If your child is not old enough to participate in a particular activity, unfortunately, they will not be able to attend. If your child is age appropriate for the activity, there are no limitations unless your child has been restricted due to behavioral issues or health issues. Membership discounts available.

Homework Assistance Program

This program is a unique way to give our parents a peace of mind while our kids take their scholastic learning to new heights. Children will get assistance with their homework. They will also participate in an array of hands-on learning activities, which includes outdoor obstacle courses that challenge their young minds to critically think while blowing off steam.

Limitations: Our staff are here to assist students during their learning when necessary. However, if your child is not cooperating and we are having a difficult time keeping them on track, we will not **force** your child. We will always encourage them to get their work done and to stay focused and if that fails, we will contact you and keep you well informed.

Late Fee Charges

As a PKC Member, you will have the freedom and flexibility to enjoy extended pick up times.

Limitations: Although the standard late fee does not apply to the Gold and Platinum PKC Membership, there are still limitations for the late fee. If you are a gold or platinum member, you will have up to one (1) hour after the designated pick up time to pick up your child. After that time span, the late fee charges will apply after the ten (10) minute mark. This means, if pick up time is at 6:00pm, you will have until 7:00pm to pick up your child if you are on the platinum membership. At 7:10pm, you are officially considered late and will be charged the late fees according to what's listed on the Phoenix Kids Price Sheet. **All late pick up extensions must be emergency only and communication must be established. If there is no communication, parent will be responsible for relevant late fee charges. Traffic is not considered an emergency unless you are the cause of it due to an emergency situation such as a car accident.**

Additional Work Schedule Accommodations

We understand that many of our parents have unpredictable work schedules which is why our team is dedicated to serving our PKC parents to the fullest capacity. We will ensure you are able to meet the demanding needs of your work schedule by honoring up to five (5) hours in additional time at our management's discretion.

Limitations: Additional time shall not exceed more than the original agreed upon pick up time, unless otherwise approved by PKC Management. **(Subject to additional service fees)**

No Unauthorized Drop Off's Accepted

All payments are due on Monday no later than 10am. If parents drop off their child(ren) without making their weekly payments first, along with all additional late fees (if applicable), parents will be responsible to pay an additional \$25 per child, plus the additional late fee cost. Failure to adhere to payment policies will result in the temporary removal of the child. Parents will be instructed to pick up their child(ren) immediately and the child(ren) will not be allowed to return until all payments and fees have been paid in full.

I acknowledge and agree to the membership guidelines. By signing below, I understand that once payments are made and services begin, I am not eligible for refund.

Signature of Parent / Guardian: _____ **Date:** _____

Print Name: _____

Signature of Authorized Personnel: _____ **Date:** _____

Print Name: _____



CHILDREN'S ENROLLMENT FORM

Entrance Date _____ Withdrawal Date _____

Child's Name _____ Sex _____ Age _____ Date of birth _____

Home Address (Street) _____

City _____ State _____ Zip _____

Home Phone Number _____

Father's Name _____ Home Phone Number _____

Father's Home Address (if different from child's) Street _____

City _____ State _____ Zip _____

Father's Place of Employment _____ Work Phone _____

Employer's Street Address _____ City _____ State _____ Zip _____

Mother's Name _____ Home Phone Number _____

Mother's Home Address (if different from child's) Street _____

City _____ State _____ Zip _____

Mother's Place of Employment _____ Work Phone # _____

Employer's Street Address _____ City _____ State _____ Zip _____

Child's Living Arrangements: (check one) Both Parents Mother Father Other

Child's Legal Guardian(s): (check one) Both Parents Mother Father Other

The child may be released to the person(s) signing this agreement or to the following:

*Name _____ Address _____
(Street-City-State-Zip)
 Telephone Number _____ Relationship to child _____
 Relationship to Parent(s) or Guardian _____
 Other identifying information (if any) _____

*Name _____ Address _____
(Street-City-State-Zip)
 Telephone Number _____ Relationship to child _____
 Relationship to Parent(s) or Guardian _____
 Other identifying information (if any) _____

Persons to contact in the case of emergency when parent or guardian cannot be reached:

Name _____ Telephone Number _____

Name _____ Telephone Number _____

Name _____ Telephone Number _____

Name of Public or Private School child attends, if any: _____

Child's doctor or clinic name _____

Doctor/clinic phone # _____

My child has the following special needs _____

The following special accommodation(s) may be required to most effectively meet my child's needs while at the center: _____

My child is currently on medication(s) prescribed for long-term continuous use and/or has the following pre-existing illness, allergies, or health concerns: _____

EMERGENCY MEDICAL AUTHORIZATION

Should (child's name) _____ Date of birth _____
suffer an injury or illness while in the care of (Facility name) _____
and the facility is unable to contact me (us) immediately, it shall be authorized to secure such medical attention
and care for the child as may be necessary. I (We) shall assume responsibility for payment for services.

Parent/Guardian: _____

Signature

Date: _____

Facility Administrator/Person-In-Charge _____

Signature

Date: _____

Parental Agreements with Child Care Facility

The _____ agrees to provide child care for

 (Name of Facility)
 _____ on _____ a.m. to _____ p.m.
 (Name of Child) (Days of Week)
 from _____ to _____
 (Month) (Month)

My child will participate in the following meal plan (circle applicable meals and snacks):

- Breakfast
- Morning Snack
- Lunch
- Afternoon Snack
- Evening Snack
- Dinner
- Bedtime Snack

Before any medication is dispensed to my child, I will provide a written authorization, which includes: date; name of child; name of medication; prescription number; if any; dosages; date and time of day medication is to be given. Medicine will be in the original container with my child's name marked on it.

My child will not be allowed to enter or leave the facility without being escorted by the parent(s), person authorized by parent (s), or facility personnel.

I acknowledge it is my responsibility to keep my child's records current to reflect any significant changes as they occur, e.g., telephone numbers, work location, emergency contacts, child's physician, child's health status, infant feeding plans and immunization records, etc.

The facility agrees to keep me informed of any incidents, including illnesses, injuries, adverse reactions to medications, etc., which include my child.

The _____ agrees to obtain written authorization from me before my child participates in routine transportation, field trips, special activities away from the facility, and water-related activities occurring in water that is more than two (2) feet deep.

I authorize the child care facility to obtain emergency medical care for my child when I am not available.

I have received a copy and agree to abide by the policies and procedures for

 (Name of Facility)

I understand that the facility will advise me of my child's progress and issues relating to my child's care as well as any individual practices concerning my child's special needs. I also understand that my participation is encouraged in facility activities.

Signed: _____ Date: _____
 (Parent/Guardian)

Signed: _____ Date: _____
 (Facility Administrator/Person-In-Charge)

PHOENIX KIDS CLUB MEMBERSHIP PRICING

Hours of Operations:
AM/PM SCHEDULE: 6AM – 6PM
MID-DAY SCHEDULE: 12PM – 12AM
OVERNIGHT SCHEDULE: 7PM – 7AM

All ****rates**** are flat rate for all ages.

Initial & Annual Registration Fee: \$75.00 per child

Membership Option #1 - PKC Silver Membership Daytime - \$125 / weekly per child

- Before and Aftercare
- Summer Camp
- Monday through Friday Elite Childcare | 6:00AM - 6:00PM
- Interactive Fun Activity
- Breakfast, Lunch, Snacks

Membership Option #1 - PKC Silver Membership Mid-Day - \$150 / weekly per child

- Before and Aftercare
- Summer Camp
- Monday through Friday Elite Childcare | 12:00PM - 12:00AM
- Interactive Fun Activity
- Breakfast, Lunch, Snacks

Membership Option #1 - PKC Silver Membership Overnight - \$175 / weekly per child

- Before and Aftercare
- Summer Camp
- Monday through Friday Elite Childcare | 7:00PM – 7:00AM
- Interactive Fun Activity
- Breakfast, Lunch, Snacks

Membership Option #2 - PKC Gold Membership Daytime & Mid-Day - \$225 / weekly per child

- Before and Aftercare
- Summer Camp
- Monday through Saturday Elite Childcare | 6:00AM - 6:00PM | 12:00PM - 12:00AM
- Interactive Fun Activity
- Breakfast, Snacks
- Up to 1-hour Grace Period

Membership Option #2 - PKC Gold Membership 3 Shifts - \$299 / weekly per child

- Monday through Saturday **OR** Sunday through Friday Elite Childcare | 6:00AM - 6:00PM | 12:00PM - 12:00AM | 7:00PM – 7:00AM
- Before and Aftercare

- Summer Camp
- Interactive Fun Activities
- Snacks & Dinner
- Up to 1-hour Grace Period

Membership Option #3 - **PKC Platinum Membership** - \$350 / weekly per child

- Before and Aftercare
- Summer Camp
- Monday through Sunday Elite Childcare | 6:00AM - 6:00PM | 12:00PM – 12:00AM | 7:00PM – 7:00AM
- Interactive Fun Activities
- Breakfast, lunch, dinner, and snacks
- Virtual School Assistance Program
- Up to 1-hour Grace Period
- No Additional Holiday Pricing
- Local field trip participation / extracurricular activities (Half Off Admission)

ADDITIONAL SERVICES AND FEES

Late Fee	\$10 starting 10 minutes after the hour, then \$1 per minute. Note: All late payments MUST be made before child can return.
Member ONLY Drop-Ins	\$55 per day Mon – Fri 6:00AM – 6:00PM \$65 per day Mon – Fri 12:00PM – 12:00AM \$75 per night Mon – Fri 7:00PM – 7:00AM \$65 per day Sat – Sun 6:00AM – 6:00PM \$75 per day Sat – Sun 12:00PM– 12:00AM \$85 per night Sat – Sun 7:00PM – 7:00AM
Weekend Package (Includes Saturday and Sunday) ...	6:00AM – 6:00PM \$130/week 12:00PM – 12:00AM \$150/week 7:00PM – 7:00AM \$170/week

This “note” does not apply to Gold and Platinum Members.

*****Note:** There is an additional \$50 that is added to all weekly pricing for holiday weeks. For example, if you are on a \$100 per week plan, you will pay \$150 for the week on the weeks that includes, but is not limited to all major holidays such as Fourth of July, Memorial Day, Thanksgiving, Christmas, and New Year’s. If a parent has more than one child enrolled that will be attending for those holiday weeks, the parent will only pay \$25 per **additional** child. **(For instance, the first child is \$50 and the 2nd child is \$25)** If the child(ren) will not be attending on the holiday weeks, the parent is responsible for paying half of the child(ren)'s weekly payment to hold and secure their child(ren) position.

PRICING AGREEMENT FORM

Child Name: _____ Membership: _____ Price: _____
Child Name: _____ Membership: _____ Price: _____
Child Name: _____ Membership: _____ Price: _____
Child Name: _____ Membership: _____ Price: _____
Child Name: _____ Membership: _____ Price: _____

Total: \$ _____ / week / month

_____ All payments are due on Monday no later than 10am. If parents drop off their child(ren) without making their weekly payments first, along with all additional late fees (if applicable), parents will be responsible to pay an additional \$25 per child, plus the additional late fee cost. Failure to adhere to payment policies will result in the temporary removal of the child. Parent will be instructed to pick up their child(ren) immediately and the child(ren) will not be allowed to return until all payments and fees have been paid in full.

_____ I understand that I will be required to pay half of my weekly payment as a holding fee per child to secure my child(ren) position for each week my child(ren) will not be present at PKC. Failure to do so, will result in my having to pay a re-registration fee of \$75 per child plus the weekly payments for all of the missing weeks or the possible loss of my child's position.

_____ I understand that there is an additional \$50 that is added to all weekly pricing for holiday weeks. For example, if you are on a \$100 per week plan, you will pay \$150 for the week on the weeks that includes major holidays such as Fourth of July, Memorial Day, Thanksgiving, Christmas, and New Year's. If a parent has more than one child enrolled that will be attending for those holiday weeks, the parent will only pay \$25 per additional child. If the child(ren) will not be attending on the holiday weeks, the parent is responsible for paying the holding fee of \$ _____ per child to secure their child(ren) position.

By signing below, I am stating that I have fully read and understand the Phoenix Kids Club Price Plans and service cost. I understand that there is a no refund policy on my registration fee and no refunds will be granted on my weekly payments if my child has attended at least one day for the week. I agree to paying the amount of \$ _____ weekly / monthly, along with the one-time registration fee of \$ _____.

Print Name: _____ Date: _____
Signature of Parent / Guardian: _____
Signature of Authorized Personnel: _____ Date: _____

Parent/Guardian Notice of No Liability Insurance and Acknowledgment

(Only Complete this Form if Instructed by your Child Care Provider)

I understand I am being informed in writing by signing this acknowledgment that this child care facility does not carry liability insurance sufficient to protect my children in the event of an injury, etc.

Parents'/Guardians' Signature(s):

Date:

Date:

Printed Name(s):

Per SB 24 (2004) requiring child care facility owners who are not covered by liability insurance to **provide and retain written notice** regarding no coverage to the parents and guardians.

VIDEO AND IMAGE RELEASE FORM

PHOTO/VIDEO RELEASE FORM

I hereby give permission for images of my child, captured during (his, her, their) stay or during a Phoenix Kids Event through video, photo and digital camera, to be used solely for the purposes of The Phoenix Kids Club Nanny Service promotional material, classroom LIVEs, and publications, and waive any rights of compensation or ownership thereto.

Name of Child #1 (please print): _____ Age: _____

Name of Child #2 (please print): _____ Age: _____

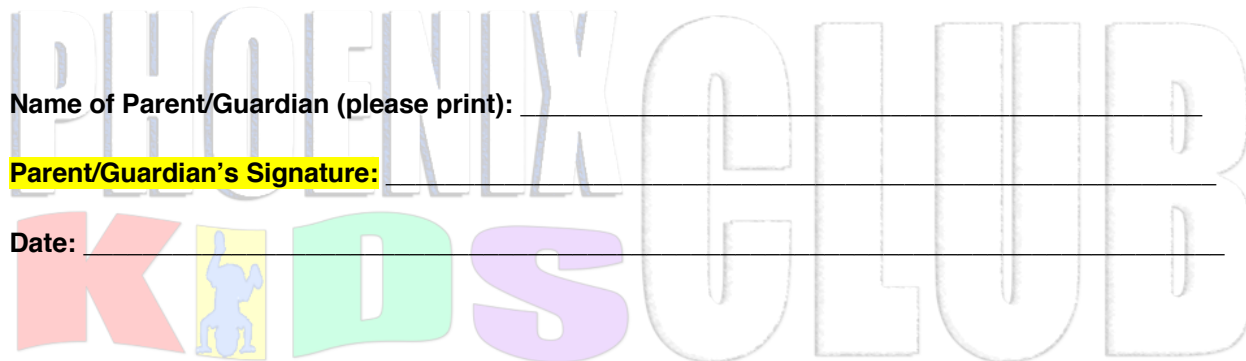
Name of Child #3 (please print): _____ Age: _____

Name of Child #4 (please print): _____ Age: _____

Name of Parent/Guardian (please print): _____

Parent/Guardian's Signature: _____

Date: _____





PHOENIX KIDS CLUB LLC.
Parent Liability Form

I _____ understand that if my child breaks, loses, or steals any property of the Phoenix Kids Club LLC. I will be held responsible to cover the damages. I understand that the property in question will need to be replaced within seven (7) days of the incident, unless a later date is agreed upon from the facility director.

Print Name: _____

Signature: _____

Date: ___ / ___ / ____

Print Name: _____

Signature: _____

Date: ___ / ___ / ____

WAIVER AND RELEASE OF LIABILITY

IN CONSIDERATION OF the risk of injury that exists while participating in PHOENIX KIDS CLUB'S FIELD TRIPS AND EXTRA CURRICULAR ACTIVITIES (hereinafter the "Activity"); and

IN CONSIDERATION OF my desire to participate in said Activity and being given the right to participate in same;

I HEREBY, for myself, my heirs, executors, administrators, assigns, or personal representatives (hereinafter collectively, "Releasor," "I" or "me", which terms shall also include Releasor's parents or guardian if Releasor is under 18 years of age), knowingly and voluntarily enter into this WAIVER AND RELEASE OF LIABILITY and hereby waive any and all rights, claims or causes of action of any kind arising out of my participation in the Activity; and

I HEREBY release and forever discharge PHOENIX KIDS CLUB LLC., located at 250 Arrowhead Blvd, Jonesboro, Georgia 30236, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns (collectively "Releasees"), from any physical or psychological injury that I may suffer as a direct result of my participation in the aforementioned Activity.

I AM VOLUNTARILY PARTICIPATING IN THE AFOREMENTIONED ACTIVITY AND I AM PARTICIPATING IN THE ACTIVITY ENTIRELY AT MY OWN RISK. I AM AWARE OF THE RISKS ASSOCIATED WITH PARTICIPATING IN THIS ACTIVITY, WHICH MAY INCLUDE, BUT ARE NOT LIMITED TO: PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, TEMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECONOMIC OR EMOTIONAL LOSS, AND DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS' NEGLIGENCE, CONDITIONS RELATED TO TRAVEL TO AND FROM THE ACTIVITY, OR FROM CONDITIONS AT THE ACTIVITY LOCATION(S). NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN AND UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY.

I FURTHER AGREE to indemnify, defend and hold harmless the Releasees against any and all claims, suits or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf, including attorney's fees and any related costs.

I FURTHER ACKNOWLEDGE that Releasees are not responsible for errors, omissions, acts or failures to act of any party or entity conducting a specific event or activity on behalf of Releasees. In the event that I should require medical care or treatment, I authorize Phoenix Kids Club LLC. to provide all emergency medical care deemed necessary, including but not limited to, first aid, CPR, the use of AEDs, emergency medical transport, and sharing of medical information with medical personnel. I further agree to assume all costs involved and agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I FURTHER ACKNOWLEDGE that this Activity may involve a test of a person's physical and mental limits and may carry with it the potential for death, serious injury, and property loss. I agree not to participate in the Activity unless I am medically able and properly trained, and I agree to abide by the decision of the Phoenix Kids Club LLC. official or agent, regarding my approval to participate in the Activity.

I HEREBY ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS "WAIVER AND RELEASE" AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. I EXPRESSLY AGREE TO RELEASE AND DISCHARGE Phoenix Kids Club LLC. AND ALL OF ITS AFFILIATES, MANAGERS, MEMBERS, AGENTS, ATTORNEYS, STAFF, VOLUNTEERS, HEIRS, REPRESENTATIVES, PREDECESSORS, SUCCESSORS AND ASSIGNS, FROM ANY AND ALL CLAIMS OR CAUSES OF ACTION AND I AGREE TO VOLUNTARILY GIVE UP OR WAIVE ANY RIGHT THAT I OTHERWISE HAVE TO BRING A LEGAL ACTION AGAINST Phoenix Kids Club LLC. FOR PERSONAL INJURY OR PROPERTY DAMAGE.

To the extent that statute or case law does not prohibit releases for ordinary negligence, this release is also for such negligence on the part of Phoenix Kids Club LLC., its agents, and employees.

I agree that this Release shall be governed for all purposes by Georgia law, without regard to any conflict of law principles. This Release supersedes any and all previous oral or written promises or other agreements.

In the event that any damage to equipment or facilities occurs as a result of my or my family's or my agent's willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any such actions of neglect or recklessness.

THIS WAIVER AND RELEASE OF LIABILITY SHALL REMAIN IN EFFECT FOR THE DURATION OF MY PARTICIPATION IN THE ACTIVITY, DURING THIS INITIAL AND ALL SUBSEQUENT EVENTS OF PARTICIPATION.

THIS AGREEMENT was entered into at arm's-length, without duress or coercion, and is to be interpreted as an agreement between two parties of equal bargaining strength. Both Participant, _____ and Phoenix Kids Club

LLC. agree that this agreement is clear and unambiguous as to its terms, and that no other evidence shall be used or admitted to alter or explain the terms of this agreement, but that it will be interpreted based on the language in accordance with the purposes for which it is entered into.

In the event that any provision contained within this Release of Liability shall be deemed to be severable or invalid, or if any term, condition, phrase or portion of this agreement shall be determined to be unlawful or otherwise unenforceable, the remainder of this agreement shall remain in full force and effect. If a court should find that any provision of this agreement to be invalid or unenforceable, but that by limiting said provision it would become valid and enforceable, then said provision shall be deemed to be written, construed and enforced as so limited.

In the event of an emergency, please contact the following person(s) in the order presented:

Emergency Contact

Contact Relationship

Contact Telephone

I, THE UNDERSIGNED PARTICIPANT, AFFIRM THAT I AM OF THE AGE OF 18 YEARS OR OLDER, AND THAT I AM FREELY SIGNING THIS AGREEMENT. I CERTIFY THAT I HAVE READ THIS AGREEMENT, THAT I FULLY UNDERSTAND ITS CONTENT AND THAT THIS RELEASE CANNOT BE MODIFIED ORALLY. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND THAT I AM SIGNING IT OF MY OWN FREE WILL.

Participant's Name:

Participant's Address:

Signature:

Date:

PARENT / GUARDIAN WAIVER FOR MINORS

In the event that the participant is under the age of consent (18 years of age), then this release must be signed by a parent or guardian, as follows:

I **HEREBY CERTIFY** that I am the parent or guardian of _____, named above, and do hereby give my consent without reservation to the foregoing on behalf of this individual.

Parent / Guardian Name: _____

Relationship to Minor: _____

Signature: _____

Date: _____

PHOENIX CLUB KIDS CLUB

AN EXTENDED CHILDCARE SERVICE FOR KIDS. PREPARING BRIGHT MINDS FOR BRIGHT FUTURES!

In today's society, we understand the importance of being solution oriented, especially in the prevention and fight against COVID-19. We are currently enforcing strict COVID-19 policies, procedures, and taking preventative measure to contribute the dismantling of the virus altogether. Here's how we are currently participating in the prevention and fight against COVID-19:

- Upon entering into our facility, parents are not permitted to walk beyond the waiting area located at the front entry door. Parents must wear face masks, or they will not be granted access.
- All PKC Staff are required to wear approved PKC face shields and mask when interacting with all PKC Kids.
- All kids, parents, and staff entering our facility are screened for fevers to ensure they have a normal temperature.
- Kids are immediately instructed to take off all shoes, coats, hats, and scarfs and place them inside their individually assigned and sanitized cubbies.
- Once our PKC Kids have stored their belongings, they go straight to the bathroom without touching anything to wash their hands with PKC approved antibacterial soap.
- PKC Kids are guided to wash their hands or use hand sanitizer before and after each transitional activity.
- All items within the facility, including toys, tables, chairs, remotes, and more are deeply sanitized at the beginning and end of every shift. All items are also sanitized once our PKC Kids are down for their naps.
- All meals such as breakfast, lunch, dinner, and snacks are prepared with clean gloves and love.

It is our #1 mission and goal to serve our PKC Family in a safe, fun, and friendly manner.



PHOENIX KIDS CLUB LLC.

Authorization for Automatic Payment

I hereby authorize Phoenix Kids Club LLC. to automatically withdraw my weekly service charges for the membership selected below: **(check the one that applies)**

Registration Fee: \$ _____

Silver Membership: _____

Gold Membership: _____

Platinum Membership: _____

Additional Fee: _____

Total Weekly Payment: \$ _____

Initial Processing Date: ____ / ____ / _____ **(Payments will process every Monday before 10AM)**

I understand that any authorized debit charges, credit charges, or transfers will be automatically processing through Phoenix Kids Club's automated payment processing system. These debits or transfers will process every Monday before 10AM. If payment is unable to process before 10AM for any reason outside of untimely processing, I understand that I will be responsible for immediately paying the additional late charge fee, along with any overdue balances.

Full Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Card Number: _____

Card Type: _____ (Visa, Mastercard, American Express, etc.)

Exp. Date: ____ / ____ CVV: _____

Print Name: _____

Signature: _____

Date: ____ / ____ / ____



**Georgia Department of Early Care and Learning
Childcare and Parent Services (CAPS)
Provider Published Rate Form**



CHILD CARE PROVIDER: Please complete this form in its entirety.

Provider's Official Name: (Required)	PHOENIX KIDS CLUB LLC.	CAPS Provider ID#:	141648
Complete Address: (Required)	250 ARROWHEAD BLVD JONESBORO, GA 30236	Provider License/ Exemption Number:	CCLC - 57106
Phone number:	(888)807-1241	Provider's Email Address (Required):	ADMIN@THEPHOENIXKIDS.COM
Fax number:			
School/ School District served:	CLAYTON		
Person completing this form:	SHANELL WILLIAMS - FACILITY DIRECTOR	Date:	

The Childcare and Parent Services (CAPS) program is designed to help families afford safe quality childcare.

The Provider shall charge the same rates to families subsidized by CAPS as it charges other consumers and shall provide documentation, upon request, to demonstrate compliance with this requirement. CAPS does not pay for transportation fees, book fees or extracurricular fees (such as field trips) that may be charged over the provider's rates. Furthermore, the provider shall not bill, and CAPS will not pay for childcare during any period of time when another federal or state program, including but not limited to, Head Start or Georgia's Pre-K, has paid for the child's care. **CAPS rate changes may not coincide with your rate changes. Please adjust accordingly. Completion of this form does not guarantee payment as there must be a coinciding active childcare scholarship on file before payment can be made.**

Are you a GA Pre-K site?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If a GA Pre-K site, do you follow the same schedule for holding Pre-K class as the school district in which the center is located? (i.e. Are Pre-K classes not held on days that school age children are out of school, including teacher work days?)	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA

REG FEE AMT	Special Needs Rate	INFANT RATE (0-12 MTHS)	RATE FOR ONE (1) YR OLD	RATE FOR TWO (2) YRS OLD	RATE FOR THREE (3) YRS OLD	RATE FOR FOUR (4) YRS OLD	RATE FOR FIVE (5) YRS OLD	PRE-SCHOOL RATE (AGES 3-5)	DAILY (PT CARE) RATE	NIGHT CARE RATE	DAILY RATE	SCHOOL AGE FULL TIME RATE	BEFORE/ AFTER SCHOOL RATE	GA PRE-K SITES BEFORE/ AFTER PRE-K RATE
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$