



**Majestic Academy**  
**1250 Old Camden Rd.**  
**Winnsboro, SC 29180**  
**803-815-1307**  
<http://www.majestic-academy.org>

Application Date\_\_\_\_\_

Date of Re-Enrollment\_\_\_\_\_

**ALL FEES ARE DUE ON THURSDAY BY 12:00 NOON**

**REGISTRATION FEE \$60.00 (non-refundable and are paid per program session)**

Name of Child\_\_\_\_\_ Birth Date\_\_\_\_\_

Home Address\_\_\_\_\_ Zip Code\_\_\_\_\_

**INFORMATION ABOUT THE FAMILY**

Mother/Guardian's Name\_\_\_\_\_

Address\_\_\_\_\_ Zip Code\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Email\_\_\_\_\_

Home Phone\_\_\_\_\_ Work\_\_\_\_\_ Cell\_\_\_\_\_ Cell Phone Provider\_\_\_\_\_

Father/Guardian's Name\_\_\_\_\_

Address\_\_\_\_\_ ZipCode\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_

Home Phone\_\_\_\_\_ Work\_\_\_\_\_ Cell\_\_\_\_\_ Cell Phone Provider\_\_\_\_\_

**IMPORTANT INFORMATION ABOUT YOUR CHILD**

Does your child have any known allergies NO\_\_\_ YES\_\_\_ If yes please explain\_\_\_\_\_

Does your child have any chronic illness/condition NO\_\_\_ YES\_\_\_ If yes, please explain\_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

THE LISTED PEOPLE HAVE MY PERMISSION TO PICK UP MY CHILD/REN FROM MAJESTIC ACADEMY OR ANY RELATED FIELD TRIP

1. NAME \_\_\_\_\_ PHONE NO \_\_\_\_\_  
RELATIONSHIP \_\_\_\_\_

2. NAME \_\_\_\_\_ PHONE NO \_\_\_\_\_  
RELATIONSHIP \_\_\_\_\_

3. NAME \_\_\_\_\_ PHONE NO \_\_\_\_\_  
RELATIONSHIP \_\_\_\_\_

**EMERGENCY CARE INFORMATION**

Name of child's Doctor \_\_\_\_\_ Office No \_\_\_\_\_

Address \_\_\_\_\_

Name of child's Dentist \_\_\_\_\_ Office No \_\_\_\_\_

Health Insurance Provider \_\_\_\_\_

Hospital Preference \_\_\_\_\_

**AUTHORIZATION FOR EMERGENCY MEDICAL CARE AND PARENTAL CONSENT**

When there is a medical emergency, or when a child needs immediate emergency medical treatment, if the parent(s) and the authorized person(s) cannot be reached, Majestic Academy will contact the child's doctor. If any injury/illness is life threatening, Emergency Medical Services (EMS) will be contacted, parent's will be notified, and a staff member will accompany the child to the hospital with all available health information. Majestic Academy will not be held liable for EMS transport in the event of a life threatening emergency. If you agree to these terms please sign and date below.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Relationship \_\_\_\_\_

**MEDICATIONS**

**\*ALL PRESCRIPTION MEDICATION MUST BE IN THE ORIGINAL CONTAINER WITH THE DOCTOR INFORMATION, PHARMACY NAME AND NUMBER BEFORE ADMINISTRATION. PRESCRIPTIONS WILL NOT BE ADMINISTERED WITHOUT A SIGNED AND DATED MEDICATION LOG FOR EACH DAY IT IS TO BE GIVEN. MEDICATIONS WILL BE STORED IN A DESIGNATED AREA INACCESSIBLE TO CHILDREN. MEDICATION WILL NOT BE STORED IN A CHILD'S CUBBY OR BOOKBAG.**

**TRANSPORTATION PERMISSION FOR OUTINGS**

I do hereby authorize MA to transport my child/children listed below, to /from field trips away from the center i.e Library, Restaurants, Movies, etc.

Name of Child \_\_\_\_\_ DOB \_\_\_\_\_

Name of Child \_\_\_\_\_ DOB \_\_\_\_\_

Be it hereby noted that MA will abide by all SC child restraint laws, and will have child(ren) in an appropriate car seat/seat belt

**PERMISSION TO PHOTOGRAPH/VIDEOGRAPH**

Yes or No (Please Circle one)

**IMMUNIZATION RECORDS**

South Carolina Childcare laws require that all children attending any childcare program must have a current immunization certificate. No program will be allowed to have a child enrolled in their program without this. Your child’s doctor or their Health department can provide you with current immunization information. Please ensure that the immunization information is updated with a signed expiration date.

Do I have a current copy of your child’s immunization record? \_\_\_\_\_

**\*IF YOUR CHILD(REN) IS ABSENT FOR 2 WEEKS WITHOUT NOTICE THEIR SLOT WILL BE FILLED**

Majestic Academy has an open door policy. If you are having a problem at the daycare please schedule an appointment with LaKisha Irby or Latressa Kelly. If there are any concerns or issues, we will do our best to help correct it. You can also email Ms. Irby at ([lirby@majestic-academy.org](mailto:lirby@majestic-academy.org)) or Mrs. Kelly at ([lkelly@majestic-academy.org](mailto:lkelly@majestic-academy.org))



**DISCIPLINE POLICY**

**THE SOUTH CAROLINA CHILDCARE LAWS REQUIRE THAT ALL STAFF AND PARENTS/GUARDIAN IS AWARE OF THE DISCIPLINE POLICY OF THE CHILDCARE FACILITY. BELOW IS THE POLICY ADOPTED BY MAJESTIC ACADEMY.**

LAKISHA IRBY/LATRESSA KELLY

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“Discipline” comes from the word disciple. A disciple is someone who learns from someone else. Good discipline involves compassion; caring, sensitivity and helping a child understand that mistakes are a natural part of life and not a sign of being a “Bad” person. We all must remember that discipline is learning. Majestic Academy strives to guide children in a respectful and firm way.

Corporal Punishment is NOT allowed. Positive reinforcement is used with the children as well as limited “time out”. If a child is repeatedly disruptive, parents will be asked to help work out a positive program of discipline for their child.

Majestic Academy’s goal of discipline is to help each child develop self -control, have good judgment and problem solving skills.

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I have read and understand the discipline policy of Majestic Academy

**Signature of Parent** \_\_\_\_\_ **Date** \_\_\_\_\_



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The purpose and goal of Majestic Academy is to provide a positive educational environment for learning while at play so children will experience the joy of learning by tapping into their own creative abilities. This will help promote love for learning while helping to develop their innate gifts and talents as well as enhance skills that are needed to advance them in life's journey.

We are very excited that you have decided to enroll in our learning facility. We look forward to working with you and your family to ensure the best and most rewarding educational experience here at Majestic Academy. Please review the checklist of documents below and verify by initialing on the line that all components of the application have been completed entirely in order to process the enrollment application.

\_\_\_\_\_ **Student Application**

\_\_\_\_\_ **Food Application (located inside Student Application)**

\_\_\_\_\_ **Student Immunization Record**

\_\_\_\_\_ **Tuition Express Authorization Form (only if it applies to your method of payment)**

\_\_\_\_\_ **Acknowledgement Of Parent Handbook**

\_\_\_\_\_ **Discipline Policy**

Thank you for joining our family here at Majestic Academy. Please feel free to contact us at (803)815-1307 if you have any questions about the enrollment process.



## PARENT COMMITMENT ACKNOWLEDGEMENT OF HANDBOOK

We agree to accept all rules and regulations of MA. We understand that MA does not tolerate profanity, obscenity in word and/or action, or disrespect to the personnel of the Academy. We will encourage our child to comply with school regulations. We realize that the MA reserves the right to dismiss any student who does not respect its spiritual standards or cooperate in the educational program. We understand that damage to property by our child will be directly charged to us. We agree to pay the TUITION AND ANY OTHER FEES as are chargeable according to the current tuition schedule and fees that have been stated in this booklet and/or the Admission Agreement. Yes, we agree to pay our financial obligation to the MA on the date due. We have read ALL of this Parent Handbook, understand and agree to it. We also commit to volunteering. All parents are encouraged to become a member of the PTO. Parents must participate in Parent/Teacher Conferences after each marking period. Parents also must attend workshops and seminars.

By signing this page in the space provided below, I hereby acknowledge that I have received and I understand the contents of the Parent Handbook of Majestic Academy. I also acknowledge that the same has been discussed with me and if I had any questions, they were fully answered. I understand the policies in full and I am signing below being fully informed of the benefits and consequences set forth in the Handbook. I also acknowledge that if I have any questions about this Handbook in the future or any policies of Majestic Academy, I have been encouraged to direct them to the Executive Director or the Director. The original of this page will be placed in the Parent/Student's file and a copy of this page will be given to the Parent as part of the Handbook.

Date \_\_\_\_\_ Parent Name \_\_\_\_\_  
(Print Name)

Parent Name \_\_\_\_\_  
(Sign Name)

Date \_\_\_\_\_ Administration: \_\_\_\_\_  
(Print Name)

Administration \_\_\_\_\_  
(Sign Name)



**TUITION & ENROLLMENT AGREEMENT CONTRACT 2023-2024**

Student(s) Name \_\_\_\_\_  
Parent/Guardian \_\_\_\_\_  
Home Number \_\_\_\_\_

Family/Custodial Signatures to this agreement indicates that you have read, understand, and fully agree to adhere to all terms and conditions as outlined in the contract. This agreement certifies you are indeed requesting enrollment in the program, agree to provide all requested information/documents and agree to pay all tuition and fees associated with enrollment as requested and outlined by Majestic Academy Inc., in accordance to set requirements, fees and schedules which are listed Majestic Academy’s written Tuition and Enrollment policy, Student Application, Parent Handbook, and Majestic Academy Guidelines.

\_\_\_\_\_  
Initial

**Please Read:**

The below referenced Arbitration Clause must be read and signed. This clause explains Majestic Academy’s process in handling any circumstance arising due to lack of accurate, timely, or intent to submit payments, including but not limited to tuition, fees etc. incurred while enrolled at Majestic Academy.

**Majestic Academy: Tuition and Enrollment Policy**

**Admission Procedure**

All members (legal guardians), interested in enrolling a student at Majestic Academy will be given an enrollment package that must be completed and returned prior to the child’s first day of enrollment in the program.

\_\_\_\_\_  
Initial

**Fiscal School Year**

August through June (All preschool programs)

August through June (Afterschool Program)

June up until 1<sup>st</sup> week of public school TBA (Summer Camp)

**Registration Fees**

Registration fees are required for acceptance, non refundable, and valid for 90 days. \_\_\_\_\_  
Initial

**First Week Tuition**

First week tuition must be arranged and paid in full on or before the Friday prior to the first day of attendance. \_\_\_\_\_  
Initial

**Tuition Billing/Payments**

All tuition/fees are billed in advance and must be paid prior to services. Tuition is billed on Thursday of each week. Tuition payments must be cleared through direct draft/ach billing before Friday prior to the following scheduled enrollment week. Payments will be provided with our automated billing system. Information for families to upload billing information will be

provided with the tuition agreement and must be completed prior to attendance. Tuition must be made in full regardless of attendance unless other agreements have been made with the director and signed and dated. \_\_\_\_\_

Initial

**Vacation Week**

Each student is allotted (1) vacation week per calendar school year, after their first 6 months of continuous enrollment. Eligibility of this week requires a written advance 2-week notice of vacation request submitted to the office for approval. The week must be taken during 1 billing week and cannot split weeks. The vacation week must be used within the fiscal school year and the student cannot be in attendance during the vacation week. Any unused/unrequested vacation weeks remaining at the end of the fiscal school year will not be rolled over to the next year. Vacation week cannot be used as a substitution for tuition payment. Accounts must be in good standing at all times. Any lapse in enrollment or withdrawals from the program will forfeit any vacation weeks and a 6 months of consecutive attendance will be required to reinstate the vacation time. The vacation week is not eligible for inclusion in a 2 week notice of withdrawal from the program. \_\_\_\_\_

Initial

**Rates for 2023-2024 Year**

**9 HOUR RULE: Students will only be allowed to stay for Basic Childcare which consists of 9 hours starting from the time of Drop-off. Anytime after will be considered Extended Day and will require an extra fee of \$30.00 per week.**

**ENROLLMENT FEES**

Registration (Annual): 1- \$60.00, 2-\$110.00, (additional \$40/per student)

Summer Camp Registration Fee: \$60

**Basic Tuition Rates and Programs:** Full Time, Afterschool and Summer Camp are based on weekly rates.

- ❖ Please initial next to your program of choice
- ❖ Infants – 12 months      \$150.00      \_\_\_\_\_
- ❖ 1 year                        \$145.00      \_\_\_\_\_
- ❖ 2 year                        \$140.00      \_\_\_\_\_
- ❖ 3 year                        \$135.00      \_\_\_\_\_
- ❖ 4-5k                         \$130.00      \_\_\_\_\_
- ❖ Extended Day            \$30.00      \_\_\_\_\_
- ❖ Afterschool                \$50.00      \_\_\_\_\_

Summer Program (5-12yrs.) \$100.00 \_\_\_\_\_(7am-4:00pm) \$130 .00 \_\_\_\_\_(7am-6:00pm)

Annual Rate Changes: Rates listed are based on the 2023-2024 contract year. Tuition Rates are subject to a yearly increase to allow for inflation adjustments. Majestic Academy’s average adjustment is \$10/per week, and per program every other year.

\_\_\_\_\_  
Initial

❖ **PAYMENTS AND FEES**

**\*\*Returned/Declined Payments/Fees**

Any payment returned as NSF's will incur a \$25 fee, along with any applicable late fees. No exceptions. Children will not be able to attend until balance is current. \_\_\_\_\_

Initial

**Sibling Discount:** Members with two or more students enrolled in a full time program will receive a 10% discount off of the total weekly tuition billing. \_\_\_\_\_

Initial

**LATE PICK-UP/FEES:** Late pick-up starting 6:01 pm: \$1 per minute through 6:10 pm. \$5 per minute starting 6:11pm per student. \_\_\_\_\_

Initial



**HOLIDAYS,CLOSINGS,WEATHER, ILLNESS:** Majestic Academy will close during the school year for holidays and professional development classes. These days are included in the tuition cost and does not constitute a change in scheduled attendance or tuition cost.

- ❖ **Holiday Closings:** Labor Day, Thanksgiving Day, the Friday after Thanksgiving, December 24<sup>th</sup> and 25<sup>th</sup>, New Year’s Day. Professional Development: February(TBD), Good Friday, Easter Monday, Spring Break
- ❖ **Inclement Weather:** School closing based on inclement weather is based on the decision of administration in efforts to ensure the safety of the students and staff. Inclement weather closing does not constitute a change in scheduled attendance or tuition cost.
- ❖ **Illness:** Our program and licensing regulations require us to maintain our staff ratios based on the number of students enrolled and scheduled to attend each day. Based on this, we do not give exceptions, discounts or refunds on tuition days due to absences for illness.

\_\_\_\_\_  
Initial

**WITHDRAWAL POLICY**

A written notice of intent to withdraw must be received, acknowledged and settled prior to 2 weeks before the last day of attendance. Any unpaid balances on your account will void the withdrawal notice and approval to withdraw will be denied until all balances are paid in full regardless if the student(s) are present or absent during this period. Your end of the year tax forms will be held by the office until all debts are settled. Please make arrangements to settle all outstanding debts with the director.

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Parent/Guardian Signature

Date

S.S. # (last four) \_\_\_\_\_ required

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Administration Signature

Date



Majestic Academy  
Class Information Sheet

Child's Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_

Street# City State Zip Code

Date of Birth \_\_\_\_\_

Mothers Name \_\_\_\_\_

Work Number \_\_\_\_\_ Cell Number \_\_\_\_\_

Place of Employment \_\_\_\_\_

E-Mail \_\_\_\_\_

Fathers Name \_\_\_\_\_

Work Number \_\_\_\_\_ Cell Number \_\_\_\_\_

Place of Employment \_\_\_\_\_

E-Mail \_\_\_\_\_

Please list all food and all medical allergies:

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