



# Hartley Nature Preschool

## Enrollment Information Form 2024-25

### Preschool Service Contract and HNP Policy Agreements

My child \_\_\_\_\_ is enrolled in the following HNP class(es) for 2024-25:

- Mon/Wed Full Day   
  Tues/Thurs Full Day   
  Mon—Thurs Full Day   
  Forest Fridays  
 Mon/Wed/Fri AM   
  Mon/Wed PM   
  Tues/Thurs AM   
  Tues/Thurs PM   
  Mon—Thurs PM

By signing below, I am indicating that:

- I agree to the contracted days of enrollment.
- I understand that I am responsible for payment of contracted fees for the entire preschool year and that tuition payments are due on the 1st of each month if I am paying monthly.
- I have read, understand, and agree to abide by all of the policies and procedures described in the Hartley Nature Preschool Parent Handbook and all other enrollment documents and I understand that policies and procedures are subject to change at any time.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

All HNP families are required to be members of Hartley Nature Center. Please go to the HNC website to register for an account and purchase a membership. Indicate your membership status below:

- My family has a current membership. The membership expires on \_\_\_\_\_  
 I have purchased a membership [online](#). Transaction # \_\_\_\_\_  
 My family qualifies for a \$25 scholarship membership. Contact the Hartley Office Manager, Kelly, at [office@hartleynature.org](mailto:office@hartleynature.org) for directions to purchase a scholarship membership.

**Return all enrollment forms by August 5th**

electronically to Assistant Director Maria Hopkins at:

[mhopkins@hartleynature.org](mailto:mhopkins@hartleynature.org)

OR

by mail or in person to:

Hartley Nature Center  
3001 Woodland Ave.  
Duluth, MN 55803



## Medical and/or Educational Care Needs

This information is **critical** to help our teachers and school prepare to meet your child's medical and educational needs. An ICCP form and copies of all IEPs, 504s, and other relevant documents MUST be on-file BEFORE your child may start preschool. Please download an ICCP form from our [website](#) or contact Kaitlin for a copy.

- My child has special medical needs (i.e. asthma, seizures).\*
- My child has an IEP, 504, or other support plan for special educational or developmental needs (i.e. speech, autism, social-emotional development, etc).\*
- My child receives OT and/or PT care.\*
- I anticipate that my child may need additional support and/or evaluation for special medical or educational care needs during the school year.\*\*
- My child does not have any special medical or educational care needs at this time.

\*Please provide as much information as possible about your child's needs, complete an ICCP, and provide copies of all relevant documentation. (On the ICCP you will have space to describe any accommodations your child might need.) \_\_\_\_\_

\*\*Please describe: \_\_\_\_\_

Significant health events (prenatal, birth, surgery, early development): \_\_\_\_\_

Parent/Guardian Initials: \_\_\_\_\_

## Allergies and Dietary Needs

This information is **critical** to help our teachers and school prepare to keep your child safe. Licensing regulations require an ICCP allergy action plan for all mild and severe allergies to be on-file BEFORE your child may start preschool. Please download ICCP allergy action plans from our [website](#) or contact Kaitlin for a copy.

- My child has the following dietary need/intolerance that is NOT an allergy.  
Non-allergy dietary need/intolerance: \_\_\_\_\_
- My child has allergies that are  MILD  SEVERE  
Allergy/Allergies: \_\_\_\_\_
- My child has no known allergies or dietary restrictions.

Parent/Guardian Initials: \_\_\_\_\_

## Reporting Medical and Dental Care

I understand that I must report any accident, injury, or illness that requires my child to visit their medical provider or dentist to HNP staff within 24 hours (exclusive of weekends and holidays) so that HNP can report this information to the MN Department of Health and Human Services, Division of Licensing, as required.

Parent/Guardian Initials: \_\_\_\_\_

### Animals at Hartley

I understand that Hartley Nature Center is the home to a variety of educational animals such as snakes and turtles and that my child may have opportunities to interact with these animals during preschool. I understand that my child may be exposed to wild animals or dogs belonging to park visitors while in Hartley Park.

Parent/Guardian Initials: \_\_\_\_\_

### Observation Acknowledgment

I understand that HNP welcomes area college and graduate students into the preschool program to observe students as a whole class, teach practice lessons, or to complete a student teaching experience and that there may be a college student in my child’s class observing and participating in daily classroom activities. Written permission would be obtained from parents/guardians if the student were to conduct a specific research study.

Parent/Guardian Initials: \_\_\_\_\_

### Walking Field Trip Acknowledgment

I understand that my child will participate in daily walking field trips on the grounds of Hartley Park and Hartley Nature Center while enrolled in Hartley Nature Preschool for the purposes of nature study and play.

Parent/Guardian Initials: \_\_\_\_\_

### Class Family Directory and Daily Email Release

I give permission for my child’s name and family contact information, including parent/guardian name(s), email(s), and phone number(s), to be listed in a class directory  Yes  No

and for parent/guardian email addresses to be visible in the daily email seen only by my child’s class  Yes  No

Parent/Guardian Initials: \_\_\_\_\_

### Photo/Video Permission

- Yes , I give permission for my child’s photo and/or video image to be used in:
  - Hartley Nature Preschool or Hartley Nature Center publications (i.e. newsletters, brochures)
  - Hartley Nature Center/Hartley Nature Preschool website and Facebook pages
  - Public relations use (i.e. for story in newspaper or TV news)

No, I do not give photo and video permission for my child.

I understand that my child’s photo *will* be included in the daily email/Google Photo album seen only by families in our class.

Parent/Guardian Initials: \_\_\_\_\_

### Half Day and Forest Fridays No Nap Acknowledgement

I understand that half day preschool classes and Forest Fridays do not have a nap or rest time as part of the daily routine and that my child will not nap during a half day class or on Forest Fridays.

Parent/Guardian Initials (for Half Day and Forest Fridays Only) : \_\_\_\_\_

**Parent/Guardian Signature Required:**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

