

Julius R. Scruggs CHILD DEVELOPMENT CENTER & ACADEMY

Dr. Julius R. Scruggs, Founder 3509 Blue Spring Road Huntsville, AL 35810 Phone: 256-852-6673 Email: <u>JRSCDCA@FMBC.ORG</u> https://Scruggsacademy.org

2025-2026

Enrollment Package

<u>Birth Certificate and updated Immunization Records must be</u> <u>submitted with application package before students can attend.</u>



SCRUGGS ACADEMY

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Financial Commitment Form

In signing this Financial Commitment	t, I/We,		, parent(
of	do hereby	understand and agree to all	of the terms ar
conditions of the tuition and fees outli	ined in this hand	book.	
Child's Name:			
Parent's Name:			
Parent's Signature:			
Date:			
2nd Parent's Name:			
Parent's Signature:			<u> </u>
Date:			
CHOOSE ONE:			
Tuition payment will be made MON	THLY	Fuition payment will be made I	BI-Monthly

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Afterschool Commitment Form

The Afterschool Program is offered to all Academy students; however, **space is limited so that appropriate staffing can be done. The fee is \$140 per month (\$35.00/week)**. In order to secure a student's spot in afterschool care, parents must sign and submit this form and the first month's payment of \$140 to the school. Once space is full, the Academy will place students of additional families' requests on the "Waitlist". Parents will be contacted if and when a space is made available. In the event that enough "Waitlist" families request and commit to afterschool care, the school will hire additional staff and allow the appropriate number of students to enter the afterschool program.

Students who are not picked up by 3:45 pm are considered "Afterschool". A late fee will be charged to each family's account for each student who is not a paid participant in the Afterschool Program. (Please refer to the section on **PAYMENT OF TUITION**, **FEES**, **AND LATE CHARGES** in the Student Handbook for more details.)

In signing this Afterschool Commitment form, I do hereby understand and agree to all of the terms and conditions.

DOES NOT WANT AFTERSCHOOL CARE

Our Family (circle one): MUST CIRCLE ONE

WANTS AFTERSCHOOL CARE

Child's Name:	
Parent's Name:	
Parent's Signature:	
Date:	

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Media Permission Form

There are many occasions when a student at his/her school could be photographed or interviewed by the newspaper or television. There are occasions when your child's teacher would like to photograph or interview your child for certain approved professional publications. Students may be photographed working in the classroom, on the playground or in other school activities. Please check below if you give your permission for your child to be photographed and/or interviewed by the media or for professional publications. This permission would only be valid for the current school year.

Yes, my child has permission to be photographed and /or interviewed.
No, my child does not have permission to be photographed and /or interviewed.
Student's Name
GradeTeacher
School
Parent's Signature
Date
Disclaimer:

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One Call Now Parent Communication

To better serve our parents and students, JRS-CDCA is a member of the 'One Call Now' service. We ask all Families to signup for 'One Call Now'.

This service allows us to notify all parent/guardians quickly and efficiently in the event of an emergency or an early school closure. Additionally, it allows us to keep you informed of school events and other important news regarding the school. The 'One Call Now' service can notify everyone, every time, everywhere, in no time.

Please take the time to consider how important it is to be informed of information regarding your child's school. For example, if and when we are threatened with severe weather, you will be immediately notified. Minutes make a difference! The 'One Call Now' service will guarantee that you will be reached in time.

ı up now!	
Please sign & return	
Child's Name	Class/Grade
Yes, I would like to be ad	ded to the list.
No, I am not interested in	n being added to the list.
Parent/Guardian Name	
Telephone/ Cell	Telephone/ Cell
Email Address	 Email Address

Text the word ALERT to 22300 to receive text messages.

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STUDENT LIBRARY CONTRACT

I understand that this is **my** school library. I will use the library for various class assignments and projects as well as for pleasure. The care and return of all books I borrow is **my** responsibility. This means:

I am committed to improving my reading skills by reading my library books!

I will keep books clean and dry.

I will use a bookmark to mark my place.

I will leave book covers attached to the books and will not remove them.

I will keep the books free of writing or drawings.

I will keep books in a safe place (away from young children, pets, water, etc.)

I will carry my library books carefully.

I will return my books on time so that others may borrow them.

I will report any damage I notice in a book to the librarian.

If I choose not to be careful and responsible with my books, I understand the following things will happen:

- 1. If I lose a book or damage it, I will need to replace it by purchasing a new copy or paying for the damaged one.
- 2. I will not be able to check out other books until my fines are paid, or my books are returned in good condition. I understand that this will affect my grade.
- 3. A notice or invoice will be sent to my parents. (The student will be able to check out library materials when this contract is signed and returned to the library.)

Student	
(Please Print)	
If a book is lost or damaged, I agree to pay	child remember to take care of his/her library books and return them on time. the replacement cost in a timely manner. I understand that my child will need able to do so will affect his/her access to materials and therefore, his/her
Parent or Guardian	Date

"Responsibility is the key to the power you give to me!"

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School Covenant: A Commitment to Excellence

You are your child's most important teacher and role model, and we are pleased to have the opportunity to share in the education of your child. Parents, teachers, and students must combine efforts for your child to utilize his/her God-given gifts and to reach his/her highest potential. It is our expectation that our learning community share the following mission:

It is the mission of Julius R. Scruggs Child Development Center and Academy to develop and enhance the lives of children by actively honoring God, exemplifying Christian values, and providing a Christian-based, college preparatory curriculum that solidifies their spiritual, mental, physical, and social well-being.

SCHOLAR'S COMMITMENT:

As a JRS CDCA scholar, I fully agree with and commit to the following:

- I will study the Holy Bible, pray, and practice my scriptures daily as I grow in my relationship with Christ
- I will arrive at school every day by 7:45 a.m. in order to guarantee a full instructional day.
- I will attend tutoring or any other support services that are needed as required by the school and my teacher
- I will work and behave in accordance with the school's honor code.
- I will complete all my homework with excellence every night
- I will contact my teachers if I have a question or concern related to my academic or social well-being.
- I will be respectful and cooperative toward my parents and teachers.
- I will act with integrity and accept responsibility for my actions.
- I will follow all school rules, codes, policies and procedures.
- I will always behave in a caring manner that protects the safety, interests and rights of all individuals in the classroom and the school community.
- I will conduct myself in a manner that is conducive for learning.
- I will ensure my schoolwork is my own.
- I will take proper care of any technology provided to me by the CDCA.

Failure to adhere to these commitments can cause me	e to lose privileges	s and can lead to rer	noval from Julius R. Scrugg
Child Development Center and Academy			

Print Name: _	
Signature	Date

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PARENTS'/GUARDIANS' COMMITMENT:

As a parent, I fully agree with and commit to the following:

- We commit to supporting our child's growth in his/her love of Christ and understanding of the Holy Bible
- We will make sure our child arrives at Julius R. Scruggs Child Development Center and Academy every day by 7:45 a.m. -3:30 p.m. (Mon. through Fri.) on every instructional day on the school calendar unless my child is sick or there is an emergency.
- I will make arrangements so my child can be at school after the school day when and if tutoring is required.
- We will always help our child in the best way we know-how, and we will do whatever it takes for him/her to learn. This also means that we will check our child's homework every night and read to or with him/her every night.
- I will communicate respectfully with faculty and staff.
- I will read all papers that the school sends home, sign if necessary, and return thenext day.
- I will participate in all meetings and conferences concerning my child.
- I will support the academic expectations and curricular programs of the school includingallowing our child to go on school field trips.
- I will be a role model for my child and model Christian principles as I follow the rules, codes, policies, procedures, and values of the school.
- I will pick my child up from school on time or accept the consequences or penalties.
- I will notify the school if my child is unable to attend school. I understand that daily attendance is essential to student success.
- I will adhere to Julius R. Scruggs Child Development Center and Academy attendance policies ensuring the academic success of my child.
- I will ensure that my child follows the school rules, codes, policies and procedures so as to protect the safety, interests and rights of all individuals in the classroom. We will support the school as it administers consequences in response to student behavioral choices in accordance to the school policy.
- I will sign up for volunteer work and support school fundraisers and initiatives.

Failure to adhere to these commitments may cause my child to lose privileges and may lead to my child's removal from Julius R. Scruggs Child Development Center and Academy.

Print Name:	
Signature	Date



Parent/Student Handbook and Code of Conduct Guide Acknowledgement Form

I,	enrolled
in the Julius R. Scruggs Child Development Center and Academy and my	
parent(s)/guardian(s) hereby acknowledge by our signatures that we have ha	nd an opportunity to
review the Parent/Student Handbook and Code of Conduct guide. We acknow	owledge that we are
able to access it online (scruggsacademy.org) at any time and are allowed to review	v a hard copy at the
school upon request.	
(signed)	-
(signed)	_
(signed)	-
Date:	

Please return this page to the school after signing.

NOTE: ALL forms must be returned to school within five (5) school days.

2025- 2026



JULIUS R. SCRUGGS CHILD DEVELOPMENT CENTER & ACADEMY RELEASE AND WAIVER OF CLAIMS ("Release")

I,, the undersigned parent or legal guardian, do hereby release the Julius R. Scruggs
Child Development Center and Academy (JRS-CDCA) and the First Missionary Baptist Church, Inc.
(FMBC), including all of its affiliated entities, its Pastor, its officers and deacons, and its staff, and its volunteers
or designees, from any and all liability which might result from any personal injury claims or cause of action
which might result directly or indirectly from my minor child(ren)'s participation in the academic year and/or
summer program which may be conducted under the supervision or direction of the JRS-CDCA and FMBC.
Also, in my capacity as parent or legal guardian of, a minor child, I hereby
acknowledge that I understand the health risks and dangers associated with the transmission of the COVID-19
virus, and other communicable diseases, and recognize that exposure to the COVID-19 virus, or other
communicable diseases could occur while my child is in the care of the Julius R. Scruggs Child Development
Center & Academy's (JRS-CDCA) academic year and/or summer program ("Program"). I am aware that the
JRS-CDCA has put in place preventative measures to reduce the spread of COVID-19; however, the JRS-CDCA
cannot guarantee that my child will not become infected with COVID-19. As such, and in consideration for child
care services to be provided by the JRS-CDCA, the undersigned, for myself and my minor child(ren) enrolled in
the Program fully assumes all of the risks associated with participation in the Program, including the possibility
of COVID-19 (or the novel coronavirus) community spread.
I, AS A PARENT AND/OR LEGAL GUARDIAN, HAVE READ AND FULLY UNDERSTAND
AND ACKNOWLEDGE THE CONTENTS OF THE RELEASE AND AGREE THAT I AM
VOLUNTARILY WAIVING, RELEASING, INDEMNIFYING, AND DISCHARGING THE JRS-CDCA AND
ITS OFFICERS, DIRECTORS, EMPLOYEES, AND VOLUNTEERS FROM ANY AND ALL
LIABILITY, DAMAGES, AND EACH AND EVERY ACTION (COLLECTIVELY, "CLAIMS")
BY PARTICIPATION IN AND/OR ASSOCIATED WITH THE PROGRAM INCLUDING, BUT NOT LIMITED
TO EXPOSURE OR TRANSMISSION OF THE COVID-19 VIRUS.
I represent that I have full authority to sign on behalf of my child(ren) and that my signature binds each other
person having authority to make decisions on behalf of the child(ren).
person having authority to make decisions on behalf of the child(ren).
MY SIGNATURE BELOW IS CONFIRMATION THAT I HAVE READ AND FULLY UNDERSTAND
AND ACKNOWLEDGE THE CONTENTS OF THE RELEASE AND AGREE THAT I AM
VOLUNTARILY WAIVING, RELEASING, INDEMNIFYING AND DISCHARGING THE JRS-CDCA
AND ITS OFFICERS, DIRECTORS, EMPLOYEES AND VOLUNTEERS FROM THE CLAIMS.
Parent Name
Parent Signature Date

NOTE

Birth Certificate and updated Immunization records must be submitted with application package before students can attend.

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