



# A Child's Garden of Thyme

A Waldorf Program for Young Children Aged 0-5

Eucalyptus Street, Oceanside, CA 92054

[www.AChildsGardenofThyme.com](http://www.AChildsGardenofThyme.com)

Lead Educarer: Kristen Arrastia

## ***Our Center Offers:***

- A Waldorf Play & Nature Based Early Childhood Curriculum
- Bread Baking, Gardening, Puppetry, Seasonal Activities, Story & Song
- Organic Meals & Snacks
- All Natural Materials & Supplies
- Diapers Provided
- Extended Hours
- Waldorf and/or LifeWays Trained & Experienced Faculty
- First Aid & CPR Certified Director
- Full Member of WECAN
- A Representative Site of LifeWays North America

## ***Limited Enrollment***

For more information or to schedule a tour of our licensed and insured location, contact Kristen Arrastia at [Info@AChildsGardenofThyme.com](mailto:Info@AChildsGardenofThyme.com).

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## A Waldorf Home Program for Young Children Aged 0-5

## ***What is LifeWays?***

LifeWays grows from the same roots as Waldorf Education and extends to the earliest ages with a focus on the nurturing arts of homemaking and hygiene, thus helping the children to establish themselves in the real world ways of life.

## ***Mission:***

We strive to offer and provide an ideal Early Childhood experience for children aged newborn to five years of age in San Diego County. We seek to provide support and continuity of care for children of working parents, students, and others interested in an early Waldorf Education. There is a commitment to excellence and aid in all areas including parent education, Waldorf Education resources, and other Anthroposophical endeavors. Ultimately, we desire to enhance our local communities and the Waldorf Education community in San Diego County.

## **Our Program Offers:**

- A Waldorf Play-school/Daycare Program for children from birth to 5.
- A Monday –Friday independent program with a one to five day option.
- A two to eight & a half hour program beginning at 7:30am.
- A truly mixed age experience; providing continuity of care for several years with a cozy “extended family” feeling.
- Two teachers with Waldorf and/or LifeWays training & experience.
- A very small teacher to child ratio of 1 to 6 maximum (1 to 4 when infants are present).
- A program designed around being outdoors in our wonderfully mild climate.
- Healthy, organic, freshly prepared sit-down meals and snacks served family style to promote healthy, adventurous eating.
- An organic garden setting landscaped in largely edible, scented, drought tolerant plants & trees.
- Plenty of opportunities for creative, sand, dirt, and water play in an established organic garden, which is home to many birds and bugs.
- A food centric approach, which includes organic gardening, cooking from scratch, composting, vermiculture, baking, eating and much more.
- Fun, laughter, poetry, puppetry, song, seasonal activities and surprises!

## **About Fees and Tuition:**

A Child’s Garden of Thyme (ACGT) closely mirrors the other local Waldorf School preschool rates. However, all meals, snacks and diapers are included as part of our program. Our goal is to make this program as accessible to as many as families as possible. To that end, tuition adjustment, various discounts and barter opportunities may be available for those that may need and qualify for support.

All tuition, fees and deposits are non-refundable. Tuition income provides an educational program throughout the school calendar year. The annual contract represents an annual obligation. Tuition may be paid by July 15<sup>th</sup> in full or in monthly payments as described above each tuition schedule. Tuition cannot be calculated on a daily, weekly, or monthly basis. There is not a discount, refund or other allowance for absences or vacations. Should a mid-year or mid-month withdrawal become necessary, full tuition is still due, as noted in the Enrollment Contract.

## **Discounts and Work Exchanges:**

All discounts and exchanges must be agreed upon in writing and fulfilled prior to the month of July.

## **Parent Participation:**

Our center is an educational *community* and as such, we depend on each family to offer a commitment of time to festivals, fundraisers, word-of-mouth publicity of our program and events. Parent participation in day-to-day chores; such as our weekly “flower family”, daily “porch sweeper”, and daily “spider sweeper”; gives the children observing these activities a sense that their school is important and made possible by the loving, working hands of many.

Accept the children with reverence, educate them with love,  
send them forth in freedom. -Rudolf Steiner

# A Child's Garden of Thyme

## A Waldorf Program for Young Children Aged 0-5

### Registration Form

Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Nick Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
Female \_\_\_\_\_

Sex: Male

Preferred Days: Monday Tuesday Wednesday Thursday Friday

Preferred Number of Hours: 2 3 4 5 6 7 8 8.5

Does Your Family Require a Summer School Program? Yes No

Is your family interested in our parent's night out program? Yes No

Does your family require financial aid or a trade? Yes No

If yes, what percentage does your family request? 5% 10% 15% 20% 25%

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_ Father's Occupation: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Hours at Work: \_\_\_\_\_ Hours at Work: \_\_\_\_\_

Name of Child's Physician: \_\_\_\_\_

Physician's Phone: \_\_\_\_\_

Do you authorize faculty or staff from ACGT to call on behalf of your child if necessary in the case of emergency?

Yes                  No

Name, Address and Phone of persons authorized to pick up the child:

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Persons to be notified in the case of emergency, when parent or guardian is not available:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Please list any illnesses, allergies, accidents, childhood diseases or surgeries your child has had to date. \_\_\_\_\_

Please list all children in your family including the child being enrolled:

Name	Date of Birth	School or Occupation
_____	_____	_____
_____	_____	_____

Has your child had previous childcare experiences?                  Yes                  No

If yes, where?

Does anyone in your family attend or work at a Waldorf school?                  Yes                  No

Does your child have any physical handicaps?                  Yes                  No

If yes, please describe:

Does your child have a hearing loss?                  Yes                  No

If yes, please describe:

Does your child have a speech difficulty?                  Yes                  No

If yes, please describe:

Is your child:                  Right Handed                  Left Handed                  Not Sure



What foods does your child enjoy most? Least?

Are there any special nutrition needs or preferences that we should be aware of?  
What activities does your family do together?

Does your child take part in any other lessons, activities, or classes on a regular basis? (Please specify)

What cultural, religious or other traditions does your family celebrate?  
(ACGT welcomes children of all races, creeds, religions, and ethnic backgrounds.)

Are there any special activities, cultural celebrations, foods or other experiences you would like to share with the other children in our program?

Does your child use a computer or play computer/video games? If so, how often?

Does your child watch T.V., DVDs or videos? Yes          No

How often and for how long?

Which Programs?

How often does your child listen to the radio, tapes or C.D.s? What kind of music?

Does your child engage in outdoor play time? Yes          No

If yes, how often and for how long?

Does your child have pets?

Does your child have friends that he/she plays with regularly? Ages?

Does your child have imaginary friends?

Is there a special doll, toy, or blanket?

Does your child have any fears?

If there is anything else that you feel is pertinent to your child's biography that has not been covered (i.e. special abilities, physical characteristics, behavioral, medical or emotional concerns, academic strengths, and weaknesses, unusual family situation), please note it here:

**About Our Contract:**

Do you understand ACGT operates on a modified school calendar from August to June?

Yes                  No

Do you understand that the full monthly total tuition is due in full even if there are absences or vacations?

Yes                  No

Do you understand that tuition (including the monthly supply and registration fee) is due in full prior to the month being paid for?

Yes                  No

Do you understand that a full calendar month of notice is required to decrease and discontinue your child's participation once enrolled?

Yes                  No

Do you understand that by dropping your child off in our care executes the tuition contract whether you signed it or not?

Yes                  No

**About Tuition Aid or Trades:**

Do you understand that if your family is requesting a tuition adjustment or trade that you are agreeing to a full school year contract versus a month to month one?

Yes                  No

Do you understand that if you receive an adjustment and then need to break the annual school contract that you will be responsible for 50% of the adjusted amount which must be paid in full prior to completion of the last month of school?

Yes                  No

Do you understand that all tuition adjustments / trades must be made and managed in writing?

Yes                  No

**Preferred Program Payment Plan:**                  Annual                  or                  Monthly

Monthly Registration Fee:                  \$

Monthly Supply Fee:                  \$

Monthly Tuition:                  \$ \_\_\_\_\_

Monthly Tuition, Registration and Supply total:                  \$

Please return this registration form by email to [Info@AChildsGardenofThyme.com](mailto:Info@AChildsGardenofThyme.com) or mail to: **A Child's Garden of Thyme** -Attention: Kristen Arrastia  
710 Eucalyptus Street – Oceanside, CA 92054