



Enrollment Packet

Ontario Ca 91761
Ms. Ebony (323) 533-3348
Ms. Essence (323) 806-8982
Facility Number 364846156

FINANCIAL AGREEMENT

As of _____ 20____, I, _____ have been fully advised of the services offered by **Another Fun Day-Care**, and fully understand that services are available based on this written agreement and need full time care (not to exceed 10 hours) from ____:____ a.m. to ____:____ p.m. Monday through Friday (excluding holidays).

I need specialty care hours and/or days (not to exceed 10 hours) which are listed below:

Part-time care hours (4hours or less per-day M-F)_____

Part-time week (3 set days a week) circle the days you need M, T, W, TH, F

Circle the one that applies to you:

Before care only After care only Both before and after care

Any additional hours and/or days needed outside of the listed specialty hours and/or days require a written 48hour notice. The additional hours and/or days will be calculated as follows: hourly rate of \$15.00 an hour or daily rate of \$60.00 a day.

I do hereby enroll my son/daughter _____ into **Another Fun Day-Care**. As compensation of these services, I agree to pay:

An annual (**non-refundable**) registration fee of \$75.00 is due upon renewable every year, which is due on the second Monday of June each year child is enrolled.

Monthly tuition of \$_____.00 is due on the 1st of each month before care is rendered. Child will NOT be accepted into care if payment has not been received. Late fee of \$20.00 a day will be added each day until payment is received. Full tuition and late fee must be paid before child returns to daycare.

Person / agency responsible:_____

Select payment method: Zelle Cash Debit/Credit Card

Late Pick up

Picking up a child after 6:00 p.m. will result in a late fee of \$3.00 per minute. The late fee must be paid at pick up with NO EXCEPTIONS. Please call if you know you will be delayed from picking up your child at the scheduled time so we may reassure your arrival.

I understand that **Another Fun Day Care** reserves the right to increase the weekly tuition at any time, giving the parent(s) a four-week written notice. If my child's tuition is received after the drop off, Tuesday morning my account will be charged \$15.00 for each day that the account remains past due. I will receive no credit, discount or refund due to holidays, acts of God, inclement weather, sick days or parent/child vacation time. I understand that the daycare has a particular closing time, however I agree to pick up my child/children at the time agreed upon above and there is a late-pickup fee of \$3.00 per minute. I understand that I will be required to pay my child's initial fees in the form of a zelle, cash, or check. I understand that I will be charged a \$35.00 return check fee.

I understand that **Another Fun Day-Care** reserve the right to dismiss my child from the program for any valid reason with two-week written notice. Should I decide to withdraw my child from **Another Fun Day-Care**, I am required to give four weeks written notification.

Parent/Guardian Signature

Parent/Guardian Signature

Parent/Guardian print

Parent/Guardian Print



ACKNOWLEDGEMENT OF ENROLLMENT DEPOSIT

The deposit guarantees you space for your child (or children) when space becomes available. Enrollment space is reserved and secured with a deposit for up to 2 months to the desired start date of enrollment.

Your deposit will be held for one day (24 hours) in order to allow parents to read through and understand the Enrollment Agreement. A signed Agreement returned within 24 hours ensures the child's place and commits the parent(s) to all policies and procedures. If the agreement is returned unsigned within 24 hours, it is assumed that the child is not enrolled. NO SPACE will be held, and the deposit will be returned.

If an Agreement is not returned within 24 hours – signed or unsigned, the space is forfeited, and the deposit is forfeited. _____ (Initial)

If a space is available immediately, the parent(s) may fulfill all of the requirements as soon as possible, the same day if necessary, and the child may be enrolled. A space is not held without a deposit. Your deposit is credited to your last month of care.

Be advised, that tuition rates are subject to change **ANYTIME** during the space withholding period.

The deposit required to reserve a space is \$ _____.

A deposit in the amount of \$ _____ has been received from _____ to reserve space for _____,
(Child's Name)

Deposit received on _____ at ____:____ (am/pm)
Date Time

This deposit will be held for two months from the time noted above. A signed agreement must be returned within 24 hours to ensure your child's space.

I _____ understand and agree to the above.

Parent's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

By: _____ Date: _____

Name:
Owner Signature



Allergy Form

Child's Name: _____ Date of Birth: _____

Please list any of your child's allergies and any medical conditions that your child may have.

Food: _____

Medications: _____

_____ Any other substance that may cause an allergic reaction:

If my child has an allergy, I authorize that my child's name may be posted in the classroom as a reminder to staff to prevent allergic reactions. This is very important to keep your child as safe as possible and involved in a healthy environment.

Parent's Signature: _____ Date: _____

Director's Signature: _____ Date: _____

CHILD CARE EMERGENCY CONTACT INFORMATION AND CONSENT FORM

Child's Name: _____ Birth Date: ____/____/____
Address: _____

Parent/Guardian #1

Name: _____
Telephone: Home _____ Work _____ Cell _____

Parent/Guardian #2

Name: _____
Telephone: Home _____ Work _____ Cell _____

EMERGENCY CONTACTS (to whom child may be released if guardian is unavailable)

Name #1: _____
Relationship: _____ Telephone: Home _____
Work _____ Cell _____

Name #2: _____
Relationship: _____ Telephone: Home _____
Work _____ Cell _____

CHILD'S PREFERRED SOURCES OF MEDICAL CARE

Physician's name: _____
Address: _____
Telephone: _____

Dentist's name: _____
Address: _____
Telephone: _____

Hospital name: _____
Address: _____
Telephone: _____

Ambulance Service _____
Telephone: _____

(Parents are responsible for all emergency transportation charges)

CHILD'S HEALTH INSURANCE

Insurance Plan: _____ ID # _____

Subscriber's Name (on insurance card): _____

SPECIAL CONDITIONS, DISABILITIES, ALLERGIES, OR MEDICAL EMERGENCY INFORMATION: _____

PARENT/GUARDIAN CONSENT AND AGREEMENT FOR EMERGENCIES:

As parent/guardian, I consent to have my child receive first aid by facility staff and, if necessary, be transported to receive emergency care. I will be responsible for all charges not covered by insurance. I consent for the emergency contact person listed above to ACT ON MY BEHALF until I am available.

I agree to review and update this information whenever a change occurs and at least every 6 months. (date and initial to verify no changes have occurred)

(date and initial) **(date and initial)** **(date and initial)** **(date and initial)**

Parent/Guardian Signature _____ Date: _____

Witness (Notary)Signature: _____ Date: ____ / ____ / ____

Stamp:



Preventing Strangulation Policy

Choking/strangulation can occur in a number of ways. **Another Fun Day-Care** has taken multiple steps to prevent this tragedy from occurring.

Indoor and outdoor play

- Toys with long strings or loops will be removed or shortened.
- Toys from home will not be permitted into care to ensure our strangulation guidelines are followed.

Blind and window treatment

- A cleat a few inches below the top of the shade that you can wrap the cord around.
- A clamp or clothes pin to keep the cord gathered and out of reach.
- For drapery cords, install a tie-down device.
- Mats and cribs will be situated 2ft away from windows to ensure safety.

Infant/pacifier safety

- Bibs will be removed once feeding session conclude.
- Pacifier accessories/clips will not be permitted into care.
- Pacifiers will be limited to nap time and help soothe.

Clothing

- Draw strings longer than 3 inches on clothing must be secured before entering into care.
 1. Cut
 2. Sowed
 3. Tied down securely
- Scarfs are not permitted at **Another Fun Day-Care** (if you'd like your child wear a scarf please remove it during drop off)



Preventing Strangulation Policy

Signature page

I _____ have received the choking/strangulation policy that facility name has provided and agree to adhere to them.

Parent signature

Date



Photo/video Authorization Form

General Use

_____ I grant **Another Fun Day-Care** permission to photograph my child during observations, class projects, field trips, or any other classroom activity. I understand that only first names will be used and that the pictures may be used in any portfolio or displayed within the childcare.

Website Use

_____ I grant **Another Fun Day-Care** permission to use my child's photo on their website. I understand the website has a large audience and my child's photo will be available to the general public. (Photos only, No names will be used)

Facebook/Instagram/Tweeter social media official pages

_____ I grant **Another Fun Day-Care** permission to use my child's photo on their Facebook/Instagram and tweeter pages.

Child's Name _____

Parent's or Legal Guardian's Signature _____

Date _____

* This form is valid until written notice is given that **Another Fun Day-Care** no longer has permission to take/use child's photos.



Transportation Agreement form

I _____ give **Another Fun Day-Care** permission to transport

(child's name)

Check all that may apply:

_____ I give **Another Fun Day-Care** may transport my child/children to community activities, daycare field trips, school and personal residences.

_____ I give **Another Fun Day-Care** to transport my child/children in and emergency situation.

Parent/Guardian signature

Date



Napping permission

I give permission for my child _____ to sleep on or in a:

_____Pack and play/Crib

_____Mat

_____Cot

Parent/Guardian signature

Date



Infant/Toddler Individualized Plan

This plan should be completed with the parent and the teacher before a child starts AFDC. Per state regulations this form must be updated every 3 months.

Date:	Sleeping Pattern	Eating Pattern	Diapering frequency	Need to know info

Please list any special request: _____

Child's Name: _____ Age: _____

Teacher's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____



Potty Training Agreement

Follow **Another Fun Day-Care** Potty Training routines
Understand the signs of being ready to potty train
Child wears loose fitting clothing (easy to pull up and down)
Provide a minimum of 2 changes of clothing
No overalls, onesies, or T-shirts with snaps between legs
Positive reinforcement must be continued at home

Wearing Underwear

Children cannot start wearing panties or underwear until the teacher has discussed the transition with the parent.

The parent must have started successfully potty training at home and agree to above rules.

Toilet Learning Readiness

Verbal Stages of Readiness

The child is able to speak in three- or four-word sentences.

The child tells you he/she has a wet diaper, recognizes when he/she is wet.

The child tells you he/she is wetting, recognizes the sensation of being wet.

The child tells you he/she is wet and can use the potty.

Physical Psychological signs of Readiness:

Stays dry for a long time.

Can recognize when pull-up is soiled or wet.

Have bowel movements at regular times.

Can undress and pull-down own pants.

Initiates in using the toilet and ask to wear underwear.

Wants to be independent.

Child is emotionally ready and is open to learning.

Can follow 1-2 step directions.

Can use consistent words or gestures to communicate.

Is able to physically get the potty and sit on it without help.

Child's Name: _____ DOB: _____

Parent's Signature: _____ Date: _____



Acknowledgement

Another Fun Day-Care has supplied me with a copy of the Disciplinary policy, Sick policy and daily schedule.

I understand that I will receive facility Tax ID number during tax season or upon request for filing purposes.

Parent/Guardian Signature

Parent/Guardian Signature

Parent/Guardian print

Parent/Guardian Print

New Parent Orientation Check List

- Tour of Facility
- Receipt of parent handbook
- Discussion of expectations of family and the needs of child
- Overview of family support resource and activities
- Agree to the potty-training routine for two years only

Parent 1 Signature: _____ Date: _____

Parent 2 Signature: _____ Date: _____

Child's Name: _____ Age: _____



Discipline Policy

Our success is to see our children disciplined through love, consistency and positive reinforcement. The children at **Another Fun Day-Care** are often explained the rules of the childcare, so they are all familiar with the guidelines. Please keep in mind that there will be disagreements between children. Young children— especially, who are not adapted at communication; have a hard time expressing their feelings. Sometimes they hit or throw toys, and/or throw tantrums to express their feelings. This behavior is normal in most cases.

The following strategies and techniques will be used for the positive behavior

- **Set children up for success Develop** routines, schedules and planned activities with a back-up so children are involved in constructive activities and interacting positively.
- **Establish simple, clear, consistent rules** Simplicity and consistency are key elements to preschool children learning appropriate behavior.
- **Offer limited choices** Offering a few choices is a good way to teach decision-making, while allowing children input into their day.
- **Ignore negative attention-seeking behaviors.**

When you address negative attention-seeking behaviors, you are rewarding these behaviors, and they will only continue.

- **Reinforce positive behavior** Give lots of attention to children who are behaving in ways that are appropriate.

Redirect Create another activity or event to draw a child's attention away from inappropriate behavior.

- **Offer alternatives to undesirable behaviors**

Model appropriate behaviors such as negotiating for a toy instead of grabbing it.

- **Reward children for achieving** When a young child has several triumphs at changing a behavior, take a moment to tell the child that you noticed the change. When a young child makes an effort to do the right thing, recognize the effort with praise

Behavioral Issues

If I feel there is a chronic behavioral issue that needs attention, we will let you know so that you and the teacher can work together to handle it in the same way and your child has continuity in discipline between our homes. These types of behavior might include such things as biting, use of bad words, chronic hitting, etc. Together, we will try to find a solution. You may be called to remove your child if his/her behavior prevents the teacher from being able to properly care for the other children. If problem continues, other arrangements for the care of the child will have to be made, for the safety and well-being of all. Under NO CIRCUMSTANCES there will be any spanking, physical abuse, verbal abuse, name calling, or isolation used. Neither food nor sleep will ever be withheld from children as a means of punishment.



SICK POLICY

In order to protect the children in our care and offer excellent childcare, we need to ensure that we have policies in place addressing health and safety standards. Please help us by cooperating with the following policies for dealing with sick children in a group care setting:

- ***Your child must be picked up from the daycare within 1 hour should they become ill/have a fever while attending daycare.***

- Please call the center if a child is going to be absent due to illness.
- If he or she has been diagnosed with something that may be contagious, we especially need to know so other parents can be notified. Parents will be alerted if the children have been exposed to anything contagious.

Once parents are notified that the child has become ill during the day, they will be expected to pick them up promptly. If parents cannot be reached or cannot leave work, we will need to notify the people designated to pick the child up in an emergency.

- Please keep in mind that, although a child's symptoms may subside, they may still not feel well enough to return to group care. Children who cannot fully participate in center activities should not return to care.
- Our exclusion from care is based on recommendations from the public health department and include, but are not limited to the following:

- **Fever:** Children should be kept home if they run a high temperature or more. They may return to care after being fever free without medication for fever reduction for at least 24 hours. Please do not medicate children to bring a fever down in order for them to attend. Children must be free of fever and other symptoms without medication for twenty-four (24) hours prior to return to school.
- **Vomiting:** A child who cannot hold stomach contents down, must be excluded from care until they have had normal meals and the vomiting has subsided for at least 24 hours.

- Diarrhea: This is defined as loose watery stools that cannot be contained. If a child has three stools in a period of 2 to 3 hours that cannot be contained in the diaper or clothing, parents will be notified. Numerous germs can be passed through feces and if it is uncontrollable there is greater danger that it will spread, potentially infecting several children. The child may return to care once they have normal stools while eating regular meals.

- Nose & Eye discharge: Children who have thick, green, excessive discharge will need to be excluded from care until they have seen a doctor and it is under control.

- Conjunctivitis: Commonly known as pink eye, this is a condition that is very contagious. A child whose eyes are inflamed, red, itchy or draining with mucus needs to be removed from care. They may return once the child is on medication for 24 hours and there is no further drainage.

- Open blisters or sores: Any open place on a child's skin that is bleeding or oozes bodily fluid can be hazardous. The child needs to be excluded until the skin is crusted over.

- Skin rashes: All skin rashes need to have a doctor's note indicating the child is not contagious in order to return to care.

- Sore Throat: A child who has a sore throat especially if accompanied by fever or swollen glands should be kept at home.

A child with strep throat must have had at least 24 hours of an antibiotic to return to the center.

- Respiratory Symptoms: This includes difficulty in breathing, or continuous coughing to the point that the child cannot rest comfortably. Administration will give parents a copy when they are called to pick up that child. If the child is sent home one day because symptoms appear that require exclusion from care, they may not return the following day. Please understand we do not have adequate facilities and staff to meet the needs of both the ill child and the other children in the group. Therefore, we have no choice but to exclude ill children from group care. This also serves to protect all the children and staff members in the center from contagious diseases. Your cooperation in this regard is highly appreciated.