**First Day Information and Instructions**

**Infants:** Please bring diapers, wipes and formula for at least one week (preferably a month) for your child. Please also bring enough clean bottles each day for your child. If breast milk is being used, please label the bottles each day. Also, if your child has a special blanket or security item, please bring that as well. Your child will also need a change of clothing in case of blow outs or other messes. This can be left at Active Minds Child Care and Preschool until needed or outgrown. On the first day of Child Care, arrive early to go over your child’s schedule with the teacher and give them any special instructions or information that might be helpful for your child.

**Toddlers:** Please bring enough diapers/wipes, or pull ups if being potty trained, for one week (preferably a month) for your child. On the first day of child care, arrive early to go over your child’s schedule with their teacher and help get your child comfortable. Please also bring a crib sheet and blanket for your child’s sleep cot. Each child will be assigned their own sleep cot. Blankets and sheets will be sent home each week to be washed and returned. Toddlers may also bring one comfort item for nap time, such as a stuffed animal. Please do not allow children to bring any other toys with them because they could be lost or broken. Your child will also need a change of clothing in case of accident or other messes. This can be left in their cubby until needed or outgrown.

**All day Preschoolers:** All children under age 4 will have a nap time/quiet time. Please bring a crib sheet and blanket for your child’s assigned cot. Blankets and sheets will be sent home weekly to be washed and returned. Your child may also bring one extra comfort item, such as a stuffed animal to be used during nap time only. Please do not allow preschoolers to bring any other toys will them to school because they could be lost or broken. Your child will also need to bring a backpack to school each day to take home school work. Please also send a change of clothes for your child in case of accidents. These can be left in your child’s cubby until needed or outgrown.

**Preschool only:** Please have your child bring a backpack each day to take home school work. Please also have a change of underwear and pants in the backpack in case of accidents.

**Before and After School:** Your child will not typically need to bring anything with them. During school breaks and summer vacation, school aged kids can bring a pillow, blanket and/or a stuffed animal on days when we will have movies or other special events. If your child has occasional accidents, they can leave a change of clothes in their cubby. Please arrive early on the first day to give your child’s teacher any important information they may need.
Illness Policy

PARENTS AGREE TO KEEP THEIR CHILD/CHILDREN AT HOME OR SEEK ALTERNATE CARE ARRANGEMENTS FOR THE FOLLOWING CONDITIONS:

- Pain - any complaints of unexplained or undiagnosed pain
- Fever (100°F/38.3°C or higher)
- Sore throat or trouble swallowing
- Headache or stiff neck
- Unexplained diarrhea or loose stool combined with nausea, vomiting or abdominal cramps. The child will be kept at home until all symptoms have stopped.
- Nausea or vomiting
- Sever itching of body and scalp
- Known or suspected communicable diseases.

IT IS REQUIRED TO KEEP (OR TAKE) A CHILD HOME WHEN THE CHILD:

- Is suffering from one or more of the above symptoms
- Is not well enough to take part in the activities at the child care

ULTIMATELY THE CARE OF THE CHILD IS THE PARENT'S RESPONSIBILITY

Parents will inform the child care within 24 hours of a diagnosis of a serious illness or contagious disease of a communicable nature in the family. This is to protect my family and the other families who attend the daycare. Failure to do so is grounds for immediate termination of care.

Parents agree that a child will be symptom free, without the aid of symptom reducing medications such as Tylenol, for a full 24 hours prior to returning to child care. We reserve the right to ask for a note from your family doctor, depending on the illness/disease.
MEDICATIONS:

Prescription medications will only be given to a child in care with the following conditions:

- Parent gives written permission to the caregiver, with full instructions as to dosage, and times to administer medication. (forms are available from the child care for this purpose)
- All prescribed medications must have the child's name on the prescription bottle.
- Non-prescription medications will be administered as per recommended dosages on medicine bottle.

CARE OF A SICK CHILD AND NOTIFICATION OF PARENTS

When a child becomes ill, we will make the child comfortable in a quiet place where he/she can rest and will be closely supervised.

Parents will be notified immediately and agree to begin to making alternate work arrangements or arrangements for alternate care. If your child is seriously ill, you or an alternate must come for the child IMMEDIATELY. If we cannot reach a parent, we will call an emergency contact listed on the registration form or the child's doctor may be contacted depending on the seriousness of the illness.

Emergency Release

Consent to Emergency First Aid & Transportation:
I hereby give permission that my child, ______________________, may be given emergency treatment by a staff member at Active Minds Child Care and Preschool. I also give permission for my child to be transported by car or ambulance to an emergency center for treatment, and agree to hold Active Minds Child Care and Preschool and its employees harmless in the event of any accident. I understand that the center will take every precaution and care to insure my child’s safety. Adults will provide proper supervision and will exercise every precaution to avoid accidents, in accordance with the state licensing regulations.
Parent’s/Guardian Signature ____________________________ Date: ____________________________
Consent to Medical Care and Treatment:
In the event that I cannot be contacted immediately, medical or surgical treatment can be administered to my child in the case of an accident or emergency, as prescribed by the treating physician, and I (we) agree to hold Active Minds Child Care and Preschool and its employees harmless in the event of any accident. Adults will provide proper supervision and will exercise every precaution to avoid accidents, in accordance with the state licensing regulations.

Parent’s/Guardian Signature ____________________________ Date: __________________

Permission to Photograph

I,
____________________________________
(Parent or Guardian’s name)

Give permission for Active Minds Child Care and Preschool

To photograph my child,
____________________________________
(Child’s name)

For the following purposes:

<table>
<thead>
<tr>
<th>Type of Use:</th>
<th>(Please check one)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Grant Permission</td>
</tr>
<tr>
<td></td>
<td>Decline Permission</td>
</tr>
<tr>
<td>Still Photographs:</td>
<td></td>
</tr>
<tr>
<td>Display on child care bulletin boards in classrooms</td>
<td></td>
</tr>
<tr>
<td>Display still photos on child care website</td>
<td></td>
</tr>
<tr>
<td>Show to current and prospective clients</td>
<td></td>
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<tr>
<td>To send home with the child</td>
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</tbody>
</table>

I understand that it is my responsibility to update this form in the event that I no longer wish to authorize one or more of the above uses. I agree that this form will remain in effect during the term of my child’s enrollment.
Transportation Consent

I authorize Active Minds Child Care and Preschool to take my child(ren) on field trips, special excursions, and to nearby public park facilities. I also authorize children to ride as a passenger in the vehicle owned or leased by Active Minds Child Care and Preschool. I understand all such trips are under the supervision of Providers and that proper child restraints are used in vehicles.

Parent/Guardian Signature and date

Sunscreen and insect repellent consent

I consent for Active Minds Child Care and Preschool to use sunscreen on my child(ren) when he/she plays outside. I also understand that by choosing to deny the use of sunscreen, my child will not be allowed to play outside or go on excursions with Active Minds Child Care and Preschool that are outside. Parents may provide the sunscreen they would like used on their child(ren). Sunscreen must be SPF 30 or higher.

Parent/Guardian signature and date

I consent for insect repellent to be used on my child during times when insects such as mosquitoes may be present. Parents may provide the insect repellent they would like used on their child(ren). Insect repellent is not required to participate in outdoor activities or excursions, but is recommended.

Parent/Guardian signature and date
Center Closures

Active Minds Child Care and Preschool will be closed on the following days: New Years Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, the Day after Thanksgiving, and Christmas Day.

Vacation

After three months at Active Minds Child Care and Preschool, families receive one week of vacation per year. Vacation time must be submitted at least two weeks in advance.

Tuition Payment

Tuition is due the first weekday of the month, or on the first and the fifteenth of each month if payments are being split. Payments received after the 5th and the 20th will be assessed a $10.00 late fee each day up to 10 days after the due date. After 10 days of no payment, children will not be allowed to return to active Minds Child Care and Preschool until tuition has been paid in full. Tuition is not based on your child’s attendance, but rather on the space held for your child. Child care tuition will not be adjusted for late arrivals, early pick-ups or missed days.

Termination

A two week notice is required at the time of termination. By signing this contract agreement, you agree to give a two week notice before terminating care or paying the two week fee to terminate immediately.

I have read and understand that a two week notice is required before terminating my child(ren)’s child care and that I am responsible for payment for the two weeks fee, regardless if my child attends the last two weeks. I also understand that failure to pay will result in legal action.

Parent/Guardian signature and date
Activity Authorization Form

I ______________________ give my permission for my Children to use all toys and equipment and participate in all activities at Active Minds Child Care and Preschool.

The following restrictions accepted:

________________________________________________________________________
________________________________________________________________________

I understand that outdoor play equipment, including sports equipment are used on a regular basis.

I will not hold the care giver responsible for injuries incurred while using equipment at Active Minds Child Care and Preschool, or at public parks, providing the children are supervised and the equipment is in good repair.

Comments or concerns noted:

________________________________________________________________________

Parent/Guardian Signature: _____________________________

Date: ___________________________