

Rainbow Garden Preschool



Annual Registration Fee: \$150/child

CHILD INFORMATION:

Date of Birth: _____

Last

First

Nickname

FAMILY INFORMATION:

Child lives with: _____

Parent/Guardian's Name _____ Home Phone _____ EMAIL: _____

Address (if different from child's) _____ Zip Code _____

Work Phone _____ Cell Phone _____

Parent/Guardian's Name: _____ Home Phone _____ EMAIL: _____

Address (if different from child's) _____ Zip Code _____

Work Phone _____ Cell Phone _____

CONTACTS:

Child will be released only to the parents/guardians listed above. The child can also be released to the following individuals, as authorized by the person who signs this application. In the event of an emergency, if the parents/guardians cannot be reached, the facility has permission to contact the following individuals.

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

For any child with health care needs such as allergies, asthma, or other chronic conditions that require specialized health services, a medical action plan shall be attached to the application. The medical action plan must be completed by the child's parent or health care professional. Is there a medical action plan attached? Yes ___ No ___

List any allergies and the symptoms and type of response required for allergic reactions.

List any health care needs or concerns, symptoms of and type of response for these health care needs or concerns.

List any particular fears or unique behavior characteristics the child has: _____

List any types of medication taken for health care needs _____

Share any other info that has a direct bearing on assuring safe medical treatment for your child.

EMERGENCY MEDICAL CARE INFORMATION:

Name of health care professional _____ Office Phone: _____ Hospital preference _____ Phone _____

I, as the parent/guardian, authorize the center to obtain medical attention for my child in an emergency. Signature of Parent/Guardian _____ Date _____

I, as the operator, do agree to provide transportation to an appropriate medical resource in the event of emergency. In an emergency situation, other children in the facility will be supervised by a responsible adult. I will not administer any drug or any medication without specific instructions from the physician or the child's parent, guardian, or full-time custodian. Signature of Administrator _____ Date _____

RAINBOW GARDEN PRESCHOOL



RAINBOW Garden Preschool Insurance/ Liability /Discipline Policy/Operational Policies & Procedures

I, the participant and parent, request voluntary participation for minor to participate in RGP all of which are hereinafter referred to as the "activity". _____ I consent to minor's participation in the activity and acknowledge that the minor and I fully understand minor's participation may involve risk of serious injury or death, including losses which may result not only from minor's own actions, inactions or negligence, but also from the actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, and/or the rules of play of this type of event or activity. I understand that if I have any risk concerns, I should discuss the risks associated with my participation with the activity coordinators and staff, before I sign this document and before the activity begins.

Release-Minor's Rights:

_____ In consideration of allowing minor participant to participate in associated activities, I hereby release and hold harmless Cape Fear Child Development Center and program staff of and from, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that minor participant may have of sustain with respect to any and all damage and/or injury, of any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

_____ I have read & comprehend the RGP Operational Policies and Procedures including the RGP Discipline Policy.

. _____ I have received a copy of the NC Summary of Child Care Laws.

_____ I grant RGP permission to take pictures of my child to possibly be used for DAEP website, newspaper, advertising literature for RGP. Children's names will not be posted.

_____ Following the occurrence of an Event of Default of this tuition, the Company shall, jointly and severally, pay the Holder the Holder's reasonable costs of collection, including attorneys' fees.

_____ I comprehend my child's enrollment could cause possible exposure to and illness from infectious diseases, including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness, injury, and death does exist.

_____ KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others. and asst me full responsibility for my participation; and,

_____ I certify that I have not recently tested positive for, and am not exhibiting symptoms of COVID-19, which include a cough, shortness of breath or difficulty breathing, loss of taste or smell, headache, chills, muscle or body aches and/or sore throat. I understand upon possible exposure to anyone in my family I am asked to report to the childcare facility to keep facility, staff and other families safe.

_____ I understand that I can be terminated at any time for not releasing infectious disease information regarding exposure to my family, friends, and work environment to the center.

Print name of minor: _____

Date of Birth Date: _____

Print Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

RAINBOW GARDEN PRESCHOOL



Policies and Procedures

Annual Registration: \$150. Forms can be found on our website: www.capefearchild.org

Half Day Preschool – Mon-Fri 8:30am-12:30pm. Drop off starting 8:15.

¾ Day Preschool-Mon-Fri 8:30aam-2:30pmpm. Drop off starting 8:15.

Extended Day Hours: 7am-6pm. Extended hours continue in the Montessori classroom with

routines. School Closures 2020-2021: *1/2 day & 3/4 day children have additional vacations.*

- Martin Luther King Jan 21
- Memorial Day May 27
- Labor Day Sept 2
- July 2 & 5
- Veteran's Day Nov 11
- Thanksgiving Nov 25-27
- Winter Break Dec 23-25
- Dec 31/Jan1

Fees & Tuition. Online

- Tuition due 1st day of billing cycle.
- Sibling discount \$5/cycle
- Late fee pick-up \$2/min for designated dismissal/pick up time.
- Late fee of \$20 applied midnight of 2nd day due. Enrollment terminated until paid after 4 days late. \$50 Re-enrollment fee. Account sent to collections after 7 days.
- Tuition due when sick or on vacation. One week tuition-free vacation/year.
- *If Rainbow closes due to COVID, tuition is not due.*

Half -Day Preschool-4-weekcycle (all ages) 3 days/week: \$365, 4: \$395, 5:\$425

¾- Day Preschool-4-week cycle (all ages): 3 days/week: \$550, 4: \$575, 5:\$595

Extended Care Preschool Hours. 7am-6pm
1:15-3:15 Meditation Cycle (Pick up not allowed)

Fairy& Gnome Room (age 2-3,31/2)
3 days/week: \$160, 4: \$180, 5: \$200

Age 3-5=Rainbow, Earth & Sky, Sunshine Room 3 days/week: \$155 4: \$175, 5: \$190

SCHOOL SUPPLY LIST: \$25 school supply fee COVID Adaptation to community items.

1 mug for “tea day” (new kids only), 1 pair of slippers/indoor shoes labeled for your child (no characters/blinking). 1, 8-10 oz labeled reusable water bottle (free of characters), plain or nature themed backpack/tote. Rain boots & Rain Jacket are required for inclement weather or after rain to keep clothes & shoes mud-free, please pack one change of clothes & socks for accidents.

*Full day students please bring one small blanket to keep at school (other items for meditation not allowed). *

DAILY SNACK & LUNCH POLICY AND PROCEDURE

1. Water Bottle labeled with name free of characters (same water bottle listed above)
2. 2 Cloth Napkins in lunch box (one for placemat and one for wiping face and hands)
3. Healthy morning snack (no chips, cookies or other sugary foods)-small portions please.
4. Lunch packed in labeled one gallon reusable bag (purchase cloth bag from Amazon or at the school). Please place food in reusable bags/containers for easy access to encourage independence-
5. Portion control & minimal options allows children to eat without distractions. Lunches refrigerated.
6. ***ALL PACKED ITEMS NEED TO BE PEANUT-FREE ALWAYS!***

Each child sets up their snack & lunch. Manners are practiced. Children dispose of their trash & crumbs & repack their lunch bag. Reusable containers & bags are preferred to reduce waste & protect the environment. RGP PEANUT FREE! Junk food is not permitted (potato chips, fruit roll ups). Healthy food creates healthy behavior and children.



RAINBOW GARDEN PRESCHOOL



Sick Children – Sick children are not permitted. *3 days hour fever-free is required. due to COVID. Medication is not administered.* Children with lice need to be nit free before returning to the program. When a child arrives ill or becomes ill, parents will be notified for immediate pick up. If a child is sick/cough/lethargic for multiple days, we reserve the right to have the parent keep the child home/not return until there is a doctor's note. Please notify program if child will not attend due to illness. Medical emergencies will be handled by 911 and parents. *Immediate pickup is required for sick children.*

BIRTHDAY CELEBRATIONS- RGP celebrates all children's birthdays on the exact day or the next school day if the birthday falls on the weekend. Our celebration does not include food or sweets! We mark the special day with a specific circle time & discussion about birthdays & trips around the sun. The child gets to put on a special hat while the teacher recites a birthday poem. The child walks around the sun for each year since birth. All children participate. Birthday invitations are for the WHOLE CLASS. Please see teacher.

Discipline Policy – Compassionate communication ensures respect for all individuals using age appropriate conflict resolution skills. RGP does not shame, humiliate, isolate, use or condone corporal punishment at any time. RGP will not use food or drink as a loss of privilege. Acts of violence require immediate suspension for 3 suspensions termination will result.

1-DAILY ARRIVAL

1. Children arrive & leave school by car. School starts at 8:30am Doors are locked at 8:35.am.
2. Doors open for 1/2 & 3/4 day at 8:10am. Please arrive by 8:30am to not miss valuable instruction.
3. *Tardy children will need to ring the doorbell & wait for a teacher to enter. Not all teachers can leave their classroom to answer the door. In order for a teacher to answer the door after 8:30am requires class disruption and missed instruction. Multiple tardies will result in termination.*
4. Each child receives daily health screenings & temperature check at entry and multiple times/day.
5. Prompt pick up is required if child is sick or temperature spikes during day.
6. *3-day fever free is required.*

DISMISSAL

1. At the 12:30pm & 2:30pm dismissal, children are waiting on porch. Timeliness is imperative.
2. Parents pick up children on front porch. Always have ID available for subs or new employees.
3. Pick up is not permitted between 12:30pm & 2:30pm during our meditation cycle.

Termination of Care: 2-weeks' notice is required for termination of care.

Vacations: 2-weeks' notice is required to place a hold on your account for vacations up to 1 week. Any other vacations will require regular tuition payment to hold spot.

Reporting Child Abuse / Neglect – Any teacher that suspects child abuse or neglect is legally bound to report the suspected abuse to the Department of Social Services. No member of the RGP will be subpoenaed to court for abuse / neglect cases or custody cases. *Please see attached NC Child Care Laws. Pender County Depart, of Social Services (DSS)-910-259-1240

Outdoor Play & Daily Activities – The games & activities children play outside are age appropriate. Please allow your child proper shoes & clothes for outside play.

Parent Participation- Parent participation is always welcomed.

Emergency Procedures: Staff is trained in First Aid/CPR. 911 is called if needed then parents are notified.

Grievance Procedure – All questions, complaints, & concerns need to be directed to Lindsay Thacker, Assistant Director 910-515-1100, or Director Steph Nestor 910-233-8594.