Pítter Patter Academy

School Age Enrollment Packet

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Child's Enrollment Form

Child Information

Child's Name:		Date of Birth:		
Age at Admission: Date of Admission:				
Child's Home Addres	SS:			
Phone Number:				
Primary Language: _		Identifying Marks:		
Eye Color:	Hair Color:	Skin Color:		
Sex:	Height:	Weight:		
Parent/ Guardian Inf	ormation			
Parent/ Guardian Na	ime:			
Relationship to Child	l:			
Reachable Phone Nu	ımber:			
Email Address:				
Business Name:				
Business Address:				
Business Phone Num	ıber:			
Hours At Work:				
Home Address:				
Reachable Phone Nu	ımber:			

Business Phone Number:	
Hours at Work:	
Additional Information	
Physician:	
	Phone Number:
Allergies/ Special Diets?	
Individual Health Plan for child v	vith chronic health condition? If yes, please attach:
	nts, court orders, and restraining orders pertaining to the child? If
Special limitations or concerns?	
Parent/ Guardian Signature:	
Date:	

(Please be sure to sign and date- Child's enrollment form are valid for 1 year)

Enrollment Agreement

Financial Terms and Conditions

Child's Last Name	First Name	Date of Birth

Childs Start Date:

Monday	Tuesday	Wednesday	Thursday	Friday
Arrival/Departure	Arrival/ Departure	Arrival/ Departure	Arrival/ Departure	Arrival/Departure

Please keep in mind tuition covers a 10 hour per day maximum. You are responsible for any fees accrued over the 10 hours.

Weekly Tuition

I understand that my weekly tuition fee of \$_______ is based on the schedule set above. I also understand that my tuition covers a 10 hour per day maximum and that I am responsible for all fees accrued. Pitter Patter Academy is not required to accommodate schedule changes for sick days, holidays, snow days or vacations. * If Pitter Patter Academy is able to add your child for an extra day (when space is available) you will still be required to pay for the day you originally had scheduled plus the additional day you added*.

I understand that I make payments directly at the center. I understand that I can use a check, money order, cash (given directly to either Sherri or Monique) or credit card on recurring payments.

I agree to pay the full weekly tuition fee even if my child is absent for one or more days during the calendar week (defined at Monday-Friday). If payment has not been made for 2 consecutive weeks the child's enrollment will be suspended until full payment has been received.

Fee Schedule

The following fees are non-refundable.

I agree to pay a registration fee of \$______ at the time of enrollment and again each prior to the first week in September.

I agree to pay weekly tuition on the first day my child attends, with no deduction for absences or holidays. If weekly tuition is not paid by the close of business on Friday, a \$25 late fee will be added to your tuition.

I agree to pay per child a late pickup fee of \$1 per min starting at the close of business. In order for your child to return the following business day, payment must be made in cash. Pitter Patter Academy reserves the right to terminate enrollment on the 3rd late pickup.

I agree to pay a \$35 return check fee for any checks returned. Pitter Patter Academy have the option to refuse any future checks.

Additional Information

If I withdraw my child from the program, I agree to give the center a 2 week written notice. I also agree that any prepaid balance of \$10 or less which remains at the time of my child's disenrollment, will not be remitted to me unless requested in writing within 90 days.

I understand if Pitter Patter Academy is unable to reach myself or my contacts 30 mins after the close of business, they reserve the right to notify legal authorities.

A child may be disenrolled by the center without prior notice if, in the sole opinion of management, it is in the best interest of the child or the center to disenroll the child.

The center is open Monday-Friday, 6:30 am to 6:00 pm. If necessary to close because of severe weather conditions we will contact emergency contacts. If MA is in a state of emergency/snow emergency we will be closed.

The terms of this agreement including the fees, are subject to change in whole or in part with a two week notice. This agreement can be terminated by Pitter Patter Academy at any time.

I understand that if a Pitter Patter Academy employee babysits for me or my family, and babysitting is provided solely in the person's individual capacity and not as an employee or agent of Pitter Patter Academy. I agree to release all person's individual capacity and not as an employee of agent of Pitter Patter Academy for any liability related to babysitting services, including transportation.

Certification: I certify that I have received, read and understand the information contained in the parent packet, the enrollment date form, and in this enrollment agreement, and agree to the terms and conditions set forth therein, including the Financial Terms and Conditions and Fees Schedule set forth above.

Signature of Parent/ Guardian	

Date:

Signature of Center Director

Date:

First Aid and Emergency Medical Care Consent Form

Child's Name: _____ Date of Birth: _____

I authorize staff at Pitter Patter Academy who are trained in the basics of first aid/CPR to give my child first aid/ CPR when appropriate.

I understand that every effort will be made to contact me in the event if an emergency requiring medical attention for my child. However, if I cannot be reached, I hereby authorize the program to transport my child to the nearest medical care facility and/ or to

and to secure medical treatment for my child.

Child's Physician Name:
Address:
Phone Number:
Child's Allergies:
Chronic Health Conditions:
Emergency Contacts (In order to be contacted)
Name:
Address:
Relationship to child:
Home Phone: Cell Phone:
Do you give permission for child to be released to this person? Yes No
Name:
Address:
Relationship to child:

Home phone:	Cell Phone:	
Do you give permission for child t	to be released to this person? Yes No	·
Name:		
Address:		
	Cell Phone:	
Do you give permission for child t	to be released to this person? Yes No	
Health Insurance Coverage	Policy #	
Parent/ Guardian Name:	Phone	
Parent/ Guardian Name:	Phone	
Parent/ Guardian Signature:		
Date:		

(Valid for one year)

Reporting Abuse and Neglect

As employees of Pitter Patter Academy we are mandated reporters of any concerns that a child is living with neglect or abuse. It is the staff's responsibility to bring all concerns to the directors.

The directors will discuss the concerns with all staff who have contact with the child. If there is a reasonable cause to believe that the child is suffering from abuse or neglect, she will immediately report the situation to the Department of Children and Families by oral communication and by making a written report within (48) hours after such oral communication. The oral report to DCF will occur the same school day as original concerns. All staff are mandated reporters and must make the report themselves if there is a disagreement between the staff and management on any abuse or neglect issue.

"Abuse" mean the non-accidental commission of any act by a caretaker, which causes or creates a substantial risk to the child's wellbeing.

"Neglect" means failure by a caretaker, either deliberately or through accidental negligence, to take the action necessary to provide a child with minimally adequate food, clothing, shelter, medical care, supervision, or other essential care.

"Reasonable Cause" means a basis for judgment that rests on specific facts, either directly observed or obtained from reliable source, and that supports a belief that particular event probably took place or a particular condition probably exists.

"Reportable Condition" means a serious physical or emotional injury resulting from abuse or neglect, or the commission of any act by a caretaker with a child which constitutes a sexual offense under the criminal laws of the Commonwealth or the physical dependence of a child upon an addictive drug at birth.

Any person under investigation by DCF under the 51A shall not work with children until said investigation is completed and shows no cause why said individual cannot work with children.

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Parent	7(allard	าเลก	Ngnature
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Date:

Doctor's Note Policy

As sickness in the community has increases we have decided one way to help prevent the spreading of germs is to ask for more specific information from the doctors. Please keep in mind that on occasions our health care policy supersedes a doctor's note. This will be decided on an individual basis.

We have had a couple of discrepancies from doctors about the same illnesses and to make sure all are safe from anything potentially contagious the following needs to be included in the doctor's note in order for your child to return to Pitter Patter Academy :

- The name of the child
- The date the child was seen
- The diagnosis of the child
- The exact date that the child can return to school with no limitations
- Medication prescribed if needed to be given during school hours with a medical consent form.

Parent/Guardian Signature: _____

Pitter Patter Academy 148 Merrimack St. Methuen, MA 01844 (978) 686-6595 (978) 686-6597 (fax) **Medical Note**

Dear _____ Family,

We have sent your child ______ home today because they are displaying the symptoms of_____

We currently have ______ children diagnosed, or in the process of diagnosis, with this condition/symptoms at our center. We are requiring that your child be seen by a medical professional for a diagnosis. Our policy states that children need to be symptom free for _____ hours and have no restrictions placed on them, including diet, in order to return to our center. Please keep in mind, that this policy is implemented to assist in keeping all children and staff healthy. Please return this note, with a provider's signature, along with a note stating diagnosis.

We appreciate your cooperation in adhering to our policy

Pitter Patter Academy

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Signature of medical provider

Parent Signature:_____ Date:_____

Sick and Medication Policy

Prescription and Non- prescription medication will be administered with proper authorization (parent and doctor permission). Please be sure to fill out an authorization form. Non-prescription topical medication such as diaper cream, will also require consent.

If your child is sent home ill, your child must remain home until a full 24 hours has passed without such symptoms or any new symptoms. Please keep in mind Pitter Patter Academy reserves the right to implement a 48 hour policy in place when needed. Please have a backup person who can pick up your child if you cannot leave work and stay home during your child's get well period. All children sent home sick must be picked up within 30 mins of initial phone call (this includes missed calls & voicemails). If your child is seen by a doctor, please bring a note from them stating that your child is no longer contagious and is well enough to attend school. If when seen by the doctor, it is determined by the doctor, that your child has a virus and no treatment is available, he/she must remain at home until he/she is symptom free for a full 24 hours (or 48 hour if extended).

These are the guidelines used to determine if a child must go home:

- Fever 101 Degrees (F) or higher
- Heavy or excessive coughing
- Colored or prolonged discharge from the nose
- Vomiting or Diarrhea
- Any unusual rash (yeast infection, hives, oral thrush, chicken pox, impetigo, hand foot & mouth, etc.)
- Conjunctivitis
- Unable to participate in daily activities, including going outside

Parent/Guardian Signature: _____

Non-Prescription Information

In order to meet Early Education and Care requirements, it will be necessary for you to obtain your doctor's written permission for the administration for non-prescription medication. This includes such medicine as over the counter cough syrups and Tylenol products.

You will need to present the doctor's written permission as well as a completed medicine authorization form before any medication can be given to your child at the center.

Parent/Guardian Signature: _____

Parent Agreement

- 1. Parents are required to escort their child to his/her classroom and verbally connect with the teacher when dropping them off.
- 2. Parents will be called to pick up children who become ill. Children absent due to a contagious disease may not return to Pitter Patter Academy until 24 hour after the start of antibiotic, or symptom free (see medication policy for more clarification).
- 3. Per state requirement all children must have current medical and immunization records prior to enrollment and updated once per year.
- 4. Discipline is consistent and no corporal or physical punishment will ever be used.
- 5. Children may not bring food to the center. Adequate breakfast, snack and a hot lunch are provided daily.
- 6. Every child in care at the center for more than 4 hours will have an afternoon rest period/nap as required by the state.
- 7. Children will go outside twice daily (weather permitted).
- 8. All children must have a change of clothing in their cubby to be sued in case of emergencies. All clothing must be labeled and the center is not responsible for lost clothing.
- 9. Parents must provide their child with proper supplies (diapers, wipes, formula, extra clothes, etc.).
- 10. All items from home are not allowed unless it is show and share day. Pitter Patter Academy is not responsible for lost or broken items brought in on the day.

I understand I must provide proper supplies for my child. I also understand Pitter Patter reserves the right to refuse service for not suppling my child with their necessities (for example: diapers, wipes, formula, clothing, needed medication, etc.)

Parent/Guardian Signature: _____

Plan to Avoid Termination and Suspension Policy

Pitter Patter Academy reserves the right to terminate any child in the program. Every effort will be made to have the child remain enrolled at the center prior to the beginning of the termination process. The following termination guidelines include, but are not limited to:

Parental Choice:

- Financial conditions
- Moving
- Dissatisfaction
- Conflicts

Policy Non-compliance:

- Lack of proper forms (updated forms including medical documentation or license requirement)
- Delinquent accounts (non-payment)
- Failure to obtain recommended services for the child (referrals)
- Late Pickups (after close of business day) 3 times
- Failure to provide proper supplies needed for your child
- Abusive or inappropriate parent behavior (verbal or physical: towards Pitter Patter Academy staff, the parent(s) or the children.

Safety to others:

- Biting
- Aggressive, disruptive behavior
- Destruction of property

Program

• Program does not meet the individual needs of the child.

A log will be kept with a child or parent who display behaviors described above. Parent will be notified in writing, through incident reports and/ or notes, or verbally each day. If the disruptive behavior continues a conference will be called with management, parents, and teachers (if needed) to provide an opportunity to discuss the behavior. Referrals will be offered to parents for evaluation, diagnostic or therapeutic services if necessary. A plan will be developed for behavioral intervention by Pitter Patter Academy management to be followed at the center and at home. Time frames will be set to discuss future progress and other possibilities including, but not limited to termination. Termination may be immediate for aggressive, disruptive or violent behavior.

If termination becomes necessary, the parents will be notified immediately for pickup. Written documentation for all meetings and conferences will be kept in the child's file, including options, suggestions, and referrals.

The child will be prepared for the termination in a manner consistent with the child's ability to understand.

Parent/Guardian Signature: _____

Child Guidance Policy

Pitter Patter Academy has a commitment to provide children with a safe, nurturing, educational environment. Within the commitment we focus on the importance of positive discipline procedures and the effects they have on the children that are in our care.

Below are the guidelines that are followed in our child guidance policy

- No corporal/physical punishment or verbal abuse will be used.
- Behavioral expectations are developmentally appropriate for each child.
- Patience and modeling are major parts used in the discipline.
- Recognizing children who are following directions by giving verbal praise and encourage positive behavior. The children who are following directions are praised as role models also.
- Talking with a child is at their eye level to ensure the child is comfortable at all times and not intimidated.
- Tone of voice is always neutral showing patience and understanding.
- Consequences are used when the child has continued to repeat the same inappropriate behavior.
- Consequences are related to the activity and behavior involved. The child has the ability to reverse the consequences by showing consistent positive behavior.
- Consequences will not be associate with food or bathroom times.
- If a child is demonstrating persistent unsafe behavior (harmful to themselves or others) they will be removed from the class and will remain in the management office until the child shows the ability to follow directions or a parent arrives.
- Children will not be confined to a swing, highchair, crib, playpen, or any other piece of equipment for an extended period of time in lieu of supervision.
- Consistency in vocabulary, schedule, positive behavior incentive plans, and staff will increase the positive behavior within each child.
- State Licensing discipline guidelines are maintained at all times.

I, the undersigned, do hereby consent and agree that Pitter Patter Academy has informed me of the child guidance policy that is used in their center.

Parent/Guardian Signature: ______ Date: _____

Inclement Weather Notification

In an effort to eliminate numerous phone calls in the event of program closing, we will notify parents via email of the program being CLOSED.

Pitter Patter Academy closing due to inclement weather will also be posted on our Face Book page. Please keep in mind our Face Book is private so you must friend request us.

The Inclement Weather Policy from the Parent Handbook is below:

- Pitter Patter Academy will automatically be closed in the event of a State of Emergency, snow emergency or if there is a driving ban.
- Management will use their discretion for a delayed opening, a full day closing, or an early closing for all major storms. We will do our best to take into account parents' schedules, commutes, and staffing. Our number one priority, however, is safety. We want all children, their families and our staff to remain safe. We recommend having a back-up plan for childcare in the event a storm is predicted.

Pitter Patter Academy reserves the right to call parents to pick up their children earlier than 6 pm if weather conditions are or become severe.

Child's Name:
Guardian's Name:
mail:
Guardian's Name:
mail:

Transportation Plan and Authorization 17.09 (3) and 7. 12 (1)

DOB: Child's Name: _____ My child will arrive at AM care by: Van/Bus will pick up my child and transport them to Pitter Patter Academy. _____ Parent Drop off. Private Transportation by parent. _____ Other (describe______) My child will depart from Am care by: Van/Bus will pick up my child from Pitter Patter Academy and transport them to (name of school) _____ Parent will Pick up. _____ Private Transportation by Parent. Other (describe) *My child will arrive to P.M care by:* _____ Van/Bus will pick up my child from______ (name of school) and transport them to Pitter Patter Academy. _____ Parent Drop off. Private Transportation by parent. _____Other (describe______). My child will depart from P.M care by: _____ Parent Pick up ______ Van/Bus will pick up my child from Pitter Patter Academy and transport them home. _____Other (describe______). Any other transportation requests must be stated in writing and maintained in the child's file or the above plan must be implemented. This permission is valid for one program year from the date of signature. Parent/ Guardian Signature_____

Statement of Purpose

Philosophy

Pitter Patter Academy was created to help develop children's educational, creative, and social skills ages 6 weeks through 5 years. Our goals are for each child to learn appropriate social skills, gain confidence in themselves, and provide a strong academic base to be prepared for a successful future.

We will provide a clean, safe, comfortable, and caring environment for each child, while developing their educational, creative and social skills.

Goal and Objectives

The first years of childhood are the most important for development and learning. Our educational curriculum is designed to help children reach their fullest potential. Our program provides developmentally appropriate lessons and activities which help develop the child physically, intellectually, emotionally, and socially. We provide a variety of learning activities with specific age interests in mind as we are preparing the children for the next level of learning.

Non-Discrimination

Pitter Patter Academy does not discriminate in providing services to children and their families on the basis of race, religion, cultural heritage, national origin, political belief, marital status, disabilities, sex, or sexual orientation. Toilet training is available in all classes regardless of age and is not an eligibility requirement for enrollment.

Intake Procedure

Following the initial phone inquiry, parents are invited to visit the school to discuss enrollment. When parents arrive at the center they will be given a tour of the program and shown which class their child would enter. The director will take over for the teacher and the parent may ask questions to the teachers and have their full attention. After seeing the center, the tour ends in the office where the enrollment process is discussed and if the parent decided to enroll, paperwork will need to be printed from the website and registration will be paid.

Registration and paperwork is due at least a week before the child is due to start.

Characteristics of Children Served

Pitter Patter Academy provide full daycare for children between the ages of 4 weeks and 8 years of age regardless of race, religion, cultural heritage, or disability. Pitter Patter Academy will ensure that all Early Education and Care's rules and regulations are met.

Services Provided

Infant, Toddler, Preschool, Pre-Kindergarten and School age programs are offered breakfast, lunch, and 2 snacks.

Parent Visits

Pitter Patter Academy has an open door policy and encourage parents to stop by during the day at any time and see their child at school.

Referral

If any child shows signs of having difficulty or problem with social, mental health or educational reasons, the following procedures will be followed:

- The staff is expected to notify the Director immediately. In the event of suspected child abuse or neglect, the Department of Social Services and EEC will be contacted immediately. If necessary the director will notify the parents.
- Observations of the child will be conducted by the teacher and/ or the director and written documentation will be kept.

- The director will notify the parent of concerns or problems. The contents of the written documentation and observation will be discussed with parents and a program or referral plan will be made. The director will complete a Referral Plan form containing conversations, recommendations, and plans made during the meeting. The form will be kept in the child's file.
 - A referral resource list will be provided to the parents.
- The director will follow up, and make necessary accommodations for further meetings, treatment plan, documentation or referrals. Records will be kept and added to the original file.

If indications are made that the child has a disability, the parents will be informed of their rights under Chapter 766 if the acts of 1972 and its regulations.

Report to Parents and Conferences

Pitter Patter Academy conduct developmental screenings periodically. For Infants & Toddlers, these screenings are done every 3 months. For Preschool & Pre K, screenings are done every 6 months. A copy of the reports will be kept in the child's file. If a staff member has any developmental concerns for a child, he/she will bring it to the attention of the Director & it will be addressed. Communication will be held daily between parents and teachers. Parent conferences will be set to discuss progress report.

Parental Input

Pitter Patter Academy welcomes input from parents with regards to policies and programs. Parents may submit their suggestions in writing. The Director and management will discuss and get back to the parent within a reasonable time. The Director is responsible for handling all parental input at the center level.

Parent/Guardian Signature: ______

Our Education Philosophy and Goals

Pitter Patter Academy takes pride in the education that each child receives while in their care. It has been asked "When is a child ready to start learning?" Some say Kindergarten or First grade, but in fact children are learning from the day they are born. Infants begin learning by actively listening to spoken languages, laughing, singing and different sounds from family members and friends. As the child enters into the toddler stage they begin to understand that print has meaning. When a toddler is being read to they begin to notice the relationship of the printed word with what is being said and the picture. As the child grows they observe people reading newspapers, magazines, and books with a purpose to gain information. Experience and exposure are the building blocks that children need to help them learn pre-reading and pre-writing skills.

Our emphasis on increasing language skills and knowledge helps each child gain the ability to read at an earlier stage. Each classroom is organized to encourage children to explore, participate and learn through creative activities. The curriculum is age- appropriate and at the developmental level if the children. Through routine and repetition, basic letter identification and their sounds are learned then expanded on throughout the day with activities using gross and fine motor skills, art projects, music, read aloud, and interactive games and puzzles. The daily adventures begin in our toddler rooms and continue through pre-k. Expanding a child's vocabulary will ensure their success when learning how to read and comprehend.

Some examples for each classroom:

- An abundance of books that the children can handle and look though.
- Areas for different activities to explore such as art, science, math, manipulatives, construction, music, etc.
- Ample amount of writing materials such as paper, pencils, crayons, & markers.
- Interactive letter: cards, magnets, stamps, stencils, lacings, & puzzles
- Classroom objects labeled with words and pictures, signs, posters to show the meaning of print
- Read aloud are interactive with a lesson to enhance listening skill, vocabulary, word identification, sequencing, and basic book awareness
- Communication skills are practiced by modeling and helping children communicate their wants and needs to each other appropriately.

Parent/Guardian Signature: _____

Background Records Check Policy

Pitter Patter Academy will submit a CORI, SORI & DCF Background Records Check (BRC) for all candidates with a scheduled interview. All administrators and staff will be aware that the candidate is not permitted any unsupervised contact with children.

After the results of the CORI, DCF and SORI are received the hiring process will continue. A final offer of employment will not be made until completion of the CORI review and approval, DCF review and approval and SORI review and approval. The entire BRC process must be cleared as a result of all the CORI investigation, DCF, and SORI BRC investigation as follows:

The result of CORI, DCF and SORI investigation BRC have resulted in no record/or no findings; or the hiring authority has granted discretionary approval and has documented in writing the rational for discretionary approval to hire.

Pitter Patter Academy will ensure that each candidate is informed of his/her rights to challenge the accuracy or relevancy of the BRC findings, and also will conduct and document reviews of discretionary CORI, DCF, and SORI BRC results.

Parent/Guardian Signature: ______

Administration Organization and Services

At Pitter Patter Academy, we believe in an open door policy. At any time if you have a question, comment, or concern please feel free to speak to either of the Center Directors Monique Smith or Sherri DeLucca.

The Department of Early Education and Care is the licensing authority for Pitter Patter Academy, 148 Merrimack St. Methuen, MA.

Parent/Guardian Signature: _____

Non-Discrimination Policy

Pitter Patter Academy is an equal opportunity provider. Application for enrollment and their families are accepted without regards to race, religion, cultural heritage, political beliefs, national origin, disability, sexual orientation, or marital status. Toilet training is available in all classes regardless of age and is not an eligibility requirement for enrollment.

Parent/Guardian Signature: _____

Contingency Plan for Emergency Situation

In the event of an emergency situation, the Directors will contact appropriate authorities. Whenever possible, the center to will try to remain open. This plan will be distributed to parents upon enrollment. All emergencies will be handled with in a reasonable amount of time, depending on the individual circumstances (including time of day/ and or time of year). We will ensure EEC regulations are met, including room temperature and sanitation issues.

FIRE, NATURAL DISASTER, OR CENTER EVACUATION- We will contact local authorities by use of center phone or employee's cell phone to determine whether to evacuate or shelter in place in the event of a natural disaster. In the case of evacuation, all escape routes are posted at each approved exit and destination shall depend on wind direction and the nature of the emergency. A designated meeting place will be the baseball field across the street on W. Ayer St., or if inside shelter is necessary we will walk to Heavenly Donuts located on 126 Merrimack St, Methuen Ma. Parents will be notified by the use of cellphone and a note will be posted on the front door if possible.

<u>POWER OUTAGE-</u>Emergency lighting and flash lights are available in the center. In the event that the power will not be restored within a reasonable amount of time, the parents will be contacted and informed of the situation.

LOSS OF HEAT- Parents will be notified in the event that the center's temperature does not meet minimum requirements. Management will make a decision whether to close.

LOSS OF WATER- Bottled water will bought and put at all handwashing, toileting/diapering and dishwashing stations. If the situation cannot be resolved in an acceptable period of time, the parents will be contacted and the center will close with Managements approval.

<u>MISSING CHILD-</u>Manager is contacted immediately and incident is reported. Police are to be notified. The manager will then contact the parent. Staff will continue to supervise the children while a designated staff member continues to search for the child. Staff and management will follow the direction and procedures given from the local police.

In case of natural disaster, we will contact 911, and the lieutenant on duty at the Methuen Police Department will notify the appropriate agencies.

Parent/Guardian Signature: _____

Clothing Suggestion

In order for your child to enjoy and participate in the program, please have him/her dressed for the weather. We go outside twice a day weather permitting. If it has rained, please send boots for puddles, if it snows, please send in snow pants, hats, mittens, boots, etc. Please label all clothing.

If the day is extremely cold, please send in an extra sweater and hat, we will be going outside even if only for a few minutes. Children really need fresh air and gross motor activities daily. Our consultant pediatrician says that if a child is well enough to come to school the child should be able to go outside as long as he/she stays dry. Therefore, we ask you leave a complete change of clothing including socks, at all times. Please replace the items as soon as they are used. Also, please keep in mind we reserve the right to not accept or send home a child who does not have the supplies they need for the day.

We appreciate your cooperation.

Parent/Guardian Signature: _____

Transition Plan

Children are placed in the classroom based on age and developmental ability. During this time, the teachers from each class will communicate with each other on child's abilities, needs, behaviors, and family information. The parents are given information on the transition process and what the goals are for the new class.

Pitter Patter Academy will assist the child with any concerns or issues with the transition in a manner consistent with the child's ability to understand.

Parent/Guardian Signature: _____

Referrals

This is a list of services to support children and their families in need of social, medical, or mental health services.

Department of Children and Family Services	1-800-792-5200
Director of Special Ed	1-781-338-6201
(Special Education Department- vision, hearing, screening, core evaluations, Early Interve	ention)
Department of Public Welfare	1-877-382-2363
Early Education and Care	1-978-681-9684
MSPCC	1-800-442-3035
Parental Stress Hotline	1-800-632-2188
Child Care Circuit –Voucher Agency	1-978-921-1631
WIC	1-978-681-4963

Pitter Patter Academy is not recommending the services listed above. They are provided as referrals only. Policies regarding referrals of parents to social services agencies are included in the "Parental Rights" form.

Parent/Guardian Signature:	
Date:	

Maintenance of Records

Pitter Patter Academy will keep records legible, dated and signed by the individual making the entry. Child's records will be kept updated and will be retained for five years after leaving the center.

Parent/Guardian Signature:	
-	

Field Trip and Activities Permission

Child's Name: _____

Teacher: _____

I grant permission for my child to participate in neighborhood walks. I understand that I will be informed of all planned field trips and that I may withdraw my permission for planned trips if I so desire. I grant my permission for my child to participate in the activities and in the use of the equipment at the center.

Parent/Guardian Signature: _____

Sunscreen Permission

I give the staff at Pitter Patter Academy						
(Parent Name)						
permission to apply sunblock to my child						
(Childs Name- Please fill out form for each child)						
Teachers will apply sunblock prior to going outside. Pitter Patter Academy will provide all of the children with sunblock.						
Parent/Guardian Signature:						
Date:						
Any special instructions:						

Oral Health Non-Participation Form

In January 2010, EEC issued new regulations for child care programs that includes a requirement that educators assist children with brushing their teeth if children are in care for more than four hours or if children have a meal while in care [606 CMR7.11 (11)(d)]. This regulation is intended to: *Help children learn the importance of good oral health * Provide information and resources regarding good oral health to child care programs and families * Help address the high incidence of tooth decay among young children in Massachusetts, which is associated with numerous health risks.

EEC licensed programs must comply with this regulation. However, parent may choose that their child (ren) not participate in tooth brushing while present at the child care program.

You do not need to fill out this form to have your child (ren) participate in tooth brushing while they are in child care. However, if you do not want your child to brush his or her teeth while she/he is attending the child care program, please fill out the information found below. A separate form must be filled out each child in care. This form must be renewed annually and will be kept in your child's record at the program. Should you change your mind and wish for your child to participate in tooth brushing, this form may be withdrawn at any time by requesting in writing that it be removed from your child's file. Thank you.

I <u>do not</u> wish to have my child participate in tooth brushing while in care at

Pitter Patter Academy

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

If you have any questions or concerns, please call:

Sherri or Monique at 978-686-6595

Media Release

I, the undersigned, do hereby consent and agree that Pitter Patter Academy, its employees, or agents have the right to take photographs, videotape, or digital recordings of my child upon enrollment. I acknowledge that by signing this media release I give my approval to use these in an educational assessments, instructional videos, or website reviews now or hereafter known, and exclusively for the purpose of Pitter Patter Academy. I further consent that my child's first name and picture may be revealed therein or by descriptive text or commentary.

I understand that there will be no financial or other remuneration for recording, testing, or taking photographs of my child, either for initial or subsequent transmission or

playback.

Yes, you may post pictures of my child on Facebook & Pitter Patter website

No, please do not post pictures of my child on Facebook & Pitter Patter website

Yes, you may hang pictures of my child around the classroom & in the building

No, please do not hang pictures of my child around the classroom & in the building

Parent/Guardian Signature: _____

Emergency Care Information

	Child's Name:	Date of Birth:	
	Child's Home Address:		
		Phone:	
Instruct	tions to reach Parent/Guardian		
1.			_
2.	(Name, Address, Phone #)		
	(Name, Address, Phone #) ician or Source of HealthCare		-
<u>reulau</u> 1.			
1.	(Doctor's Name, Address, Phone #)		-
<u>Emerge</u>	ency Contact Person(s) (other than pare	nt/guardian listed above)	
1.	(Name, Address, Phone#)		-
2.	(Name, Address, Phone#)		-
3.			
	(Name, Address, Phone#)		
	Medical Emergency Treatment: I hereb basic first aid and/ or CPR to my child _		sion to administer
	and/or take my child, to reached or when delay would be dange		nen I cannot be
	Allergies/ Special Diet:		

• Reminder this emergency care information is for the educator's classroom/1st aid kit. The educator(s) must take this information and 1st aid kit with them when leaving the premises.

Date:

Parent/Guardian Signature:

Permission Check off

Child's Name:

Year 2019-2020

I give my child permission to use Pitter Patter Academy provided sunblock.	
I give my child permission to go on walks with their teacher.	
I give my child permission to brush their teeth at school.	
I give my child permission to have their photos taken and posted on Pitter Patter Academy website and Facebook.	

Parent/Guardian Signature: ______