



License #434408891

# First Discoveries Christian Preschool

Developing attitudes for success!<sup>™</sup>

## AGREEMENT *Child's Name \_\_\_\_\_*

The purpose of this agreement is to nurture mutual accountability between the parents and the school. Many of these policies are listed in detail in our Handbook for Parents. Please read each item carefully, and sign to indicate your understanding and agreement. FDCP may replace First Discoveries Christian Preschool in this agreement.

Please email requesting a paper copy if you don't have access to a printer, we're happy to help!

- ~ First Discoveries Christian Preschool, is a hands-on Preschool for children ages 2.5 to 6 years old.
- ~ Our program blends Bible based Christian principles, developmentally appropriate academics, phonics, hands on activities and exploration, physical movement, nutrition education, social and emotional skills and character development. As a Christian school, we pray daily that the Lord will show us and guide us as we nurture our students. We offer a Bilingual morning program for preschoolers and a Spanish Immersion program 3-6 pm for children 2.5 to 1st grade. Returning students and their siblings have priority.
- ~ COVID Guidelines will be followed by staff, students and their families and updated as needed.
- ~ **A Trial day is required for children under 2.5 years old.** A recommendation is provided within a week.
- ~ FDCP enrolls for one school year at a time. Registration is on a first come-first served basis.
- ~ Calendar is subject to change. **Parents aren't notified by email and are responsible for alternate arrangements for scheduled holidays, minimum and teacher-in-service days or breaks.**
- ~ **Absences: We do not offer discounts or make up days for missed days.** Scheduled closed days are already factored into the annual tuition so there are no discounts or make up days for holidays or breaks.
- ~ Child Care may be available when 5 children sign up during Winter and Easter break. **By signing below, you agree that cancellations for Child Care must be received by the cut off date to avoid paying; or parents will be financially responsible to pay the child care cost even if the child doesn't attend.**
- ~ **Registration Fees are non refundable** and applicable to one summer camp season/school year only.
- ~ Tuition Fees: cover the basic services offered at FDCP and are listed on our Handbook for Parents.
- ~ To increase program, the Deposit difference is due at time of the change.
- ~ Parents will be given a 30-day notice if any fee increase is instituted.
- ~ Breakfast option is served from 8:30 to 8:45 am. Fees are listed on our Handbook for Parents.
- ~ Exemplary PreKindergarten Program: Includes 3 workbooks, handouts. Fee listed on our Handbook.
- ~ Graduation: Cap/Gown ceremony and family reception in June. Fee listed on our Handbook for Parents.
- ~ **Early Drop off or Late Pick up automatically enrolls students in Extended Care, and our Kiosk keeps track of Extended Care and Additional days. Parents approve fees on the Kiosk. Parents agree to bring payment within a week and authorize FDCP to schedule the cost in your FACTS agreement.** Certain Emergencies are an exception, and the school may consider a request to waive the late fee by email within 48 hours listing the special circumstances that caused the late pick up.
- ~ Parents accept that when their child is at school beyond their program FDCP will extend their care and **Parents are responsible to pay for Extended Care fees listed on our Handbook for Parents;** and anyone allowed to pick up their child may accept extended care fees if they drop off early or pick up late.
- ~ Payment Methods: **One annual payment** may be made payable by check to FDCP. Alternatively, a **Monthly Payment Plan** is available as an automatic draft on the 5th each month with FACTS Management Co. **Parents agree to pay FACTS own enrollment fee for the service they provide, and accept convenience fees associated with credit or debit card option, if chosen.**
- ~ Late/Missed Payment: FACTS will assess a \$35 Returned Payment fee and a \$25 late fee for each payment returned by your bank unless there is a written agreement with the director before tuition is due.
- ~ Returned Checks: \$50.00 fee each returned check. After 2 returned checks, only cash will be accepted.
- ~ Payment Attempt Returned to FACTS, payment must be made within 5 calendar days of the due date.
- ~ FDCP reserves the right to deny attendance to students whose accounts have overdue balances.
- ~ If the school decides to seek collection of any past due amount, parents agree to pay, to the extent permitted by law, FDCP's expenses of enforcement and collection of the tuition, fees and related expenses, including, without limitation, attorney's fees and costs.

**~ Early Withdrawal/Refund Policy: Summer Camps can only be cancelled before May 1st. An Early Withdrawal Request form is required to cancel your FACTS payment plan starting with the first scheduled payment after 3 weeks from your notice to apply your deposit to that month; or to refund you, if you paid in full, starting with the first full month after 30 days from your notice. BY signing below, parents accept that there are NO EXCEPTIONS and VERBAL NOTICES ARE INSUFFICIENT. Parents agree to honor the Early Withdrawal Request process if needed.**

**~ You're enrolling in a full term that guarantees your child's space. To cancel enrollment early, an Early Withdrawal Fee that equals any discount applied to Registration fees must be paid.**

**~ DEPOSIT IS NOT REFUNDABLE and CANNOT BE CANCELLED when scheduled in FACTS agreement. It can only be applied to the LAST MONTH ATTENDED.**

**~ In order to save your space in advance, if enrolling in a full school year you are committing to a 10 month payment plan or annual payment for 10 months. Your Deposit (1 month tuition) is due at time of enrollment, and can ONLY be applied to the last month contracted (mid May-mid June). If you cancel enrollment before it's paid, Deposit must be paid in order to terminate this agreement, possibly for no services rendered, if you cancel before the term you enrolled in starts. Deposit may be applied to Summer Camp if space is available. By signing you accept and agree to honor this policy.**

Sign to accept terms:

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

- ~ If your written notice is received late you have 3 options: 1) Delay your child's last day and apply the deposit to the following month. 2) Withdraw your child and release your claim to the deposit. No refunds. 3) Request a partial credit at the same time you submit your late written notice if you feel you have special circumstances that prevented you from submitting your notice in time. Your request must include the reason your written notice is late and why you feel you should receive an exception given that the school has already incurred costs when a late notice is sent. We will review your request and determine if it qualifies for an exemption that is fair to other families who have turned their notice in time. We will notify you if you qualify and how much you qualify to receive in a few days. We secure our staff a month in advance; **no refunds will be given if your notice is received less than 7 days before their last month starts.**
- ~ Your child will continue to be enrolled and your tuition will continue to be withdrawn from your account until written notice is received. If you need help request an appointment on our Parent's page online.

- ~ To change programs, the deposit difference is due at time of the change to reflect the new program.
- ~ **Parents sign in agreement** to the financial contractual terms stated here & promise to pay accordingly.
- ~ Vacation Credit: Is not cumulative and starts over every July; and days must be taken in the same week. Students may request a 25% tuition credit after being enrolled for 6 months. **Vacation Credit Request form should be submitted at least 2 weeks before it starts** on Parents page ([www.fdc.org](http://www.fdc.org))
- ~ **Car seats, back pack or large bags are NOT storable at FDCP.** Exceptions made in an emergency.
- ~ Parents agree to inform FDCP in writing if their child is not to be photographed or videotaped.
- ~ Proof of payment for tax purposes from FACTS are reflected in your bank statements and in FACTS online account information. Please request school tuition statements and allow a week for processing.
- ~ In the event that your child needs special accommodations to independently participate in our program, parents agree that before reasonable accommodations can be considered or the child is permitted to attend our school, an Accommodation Evaluation must be requested by appointment. A Plan of Management and/or a Plan of Action must be presented signed by their pediatrician. Parents are responsible for providing all appropriate equipment, training (for staff and their child), and special food (**must be cleared as peanut and tree nut free**), if applicable. For safety, attendance may be denied if the school cannot provide reasonable accommodations. See Parent Handbook for more details and options available.
- ~ Parents accept that **all students must participate independently during group activities to attend, including nap time and toilet training; and be willing to stay with the group and teachers.** Constant one-on-one supervision for one student is not available at FDCP.
- ~ If at any time we feel that our school cannot meet the needs of a child or family; if it's safe, there will be a 2 week notice to the family to find a new facility that may be more suitable to their needs or wants.
- ~ If a child requires accommodations that were not requested on their application, for safety, attendance will immediately cease to allow for an Accommodations Evaluation. Parents are responsible for alternate care and to follow the process the school has in place for Evaluating Accommodation requests.
- ~ Parents agree to cooperate with teachers and support the school in its efforts to help a child learn to modify any behavior that is considered by the director as aggressive, constantly disruptive or unsafe. They shall partner in a plan of action mutually agreed upon by parents and teachers for 2-4 weeks. If no plan or time frame can be agreed upon, or reasonable efforts do not significantly reduce the undesirable behavior, the child will be withdrawn immediately.
- ~ Purposely omitting or minimizing any student needs, that impact health or safety, at time of enrollment will cause their enrollment to become invalid and the child will be withdrawn immediately.
- ~ We reserve the right to decline continued enrollment to a child at any time for any reason not prohibited by law, if in the sole judgment of FDCP such student's parents or guardians are uncooperative, dishonest, abusive to the staff, or who in our sole opinion will not be satisfied with the school's best efforts.
- ~ Our school is licensed and regulated by the California Department of Social Services, and we are allowed to provide non-medical care and supervision to our students under California Law. Under our license and the applicable regulations we can only provide services for children we are qualified and capable of caring for. We are committed to explore all options presented to us and make an individualized assessment about whether we can meet student's individual needs, and determine if we can provide reasonable accommodations. We shall accept students provided their presence does not pose a direct threat to the health or safety of others or require a fundamental alteration of our program.
- ~ Parents shall provide medical insurance for their children.
- ~ **We nurture a healthy and honest relationship with all our families. All school policies are clearly explained in our Handbook for Parents before enrolling to avoid unpleasant surprises.**
- ~ **By signing below you confirm that you've reviewed and agree to honor them. You also agree that, in fairness, the school can make no exceptions to school policies.**
- ~ Parents understand that, by law, the Licensing Department of Social Services has the authority to interview children or staff and to inspect and audit child or child care records without prior consent. The licensed shall make provisions for private interviews with any child or staff member and for the examination of all records relating to the operation of the child care center. The department has the authority to observe the physical condition of the child including conditions that could indicate abuse, neglect or inappropriate placement.
- ~ By signing below, you confirm to have reviewed the Caregiver Background Check Process [LIC 995E].
- ~ Parents understand and agree that this agreement shall not be modified except by a new written agreement between the parties. An email between parents with a new agreement shall be a valid amendment to this agreement. When each parent or guardian signs below, they will be jointly and severally responsible for the obligations contained herein. This agreement shall be deemed to have been entered into in the State of California as a contract; its validity, effect and operation shall be determined in accordance with the provisions of California law. FDCP enters in this contract in good faith, based on currently agreed school policies. By signing below you enter into this contract with First Discoveries Christian Preschool.

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

Signature

Date

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

Signature

Date

**Please bring this agreement signed to your appointment.**



# AGREEMENTS *Child's Name* \_\_\_\_\_

*At First Discoveries Christian Preschool the health and safety of your little one is our top priority. Our dedicated staff puts all their efforts every day to ensure our facility and program is safe and healthy for your little one. We also aim to have added staff so that our teacher/student ratio is low for the best quality care. Young children are curious and unpredictable, so even with the highest standards, accidents can still happen. Please sign the consent and release below to enroll.*

## CONSENT AGREEMENT

The undersigned, parent/legal guardian of \_\_\_\_\_ ("Minor") on behalf of ("Minor") and in consideration of participation in "FIRST DISCOVERIES CHRISTIAN PRESCHOOL", understand that:

I hereby grant permission for my child to use all the play equipment and participate in all of the activities of the school.

I hereby grant permission for my child to leave the school premises under the supervision of a staff member for neighborhood walks or for field trips in an authorized vehicle. I understand that I will receive written notice prior to any field trip. Note: The only trip outside of the school planned is 2 days prior to graduation.

I hereby grant permission for my child to be included in evaluations and assessment connected with the school program.

I hereby grant permission for photographs of my child or myself to be used in educational publications and advertising.

I hereby grant permission for the Director or Acting Director to take whatever steps may be necessary to obtain emergency medical care if warranted. These steps may include, but are not limited to the following:

1. Attempt to contact a parent or guardian
2. Attempt to contact you through any of the persons listed on the emergency information form you completed for us, even the child's physician
3. If we cannot reach either parent or guardian we will call 911, follow EMS instructions and if necessary have your child taken to an emergency hospital. If 911 is called and EMS arrives, they will not release the child until parent arrives to discuss your child's health.

Any expenses incurred under #3, above, will be borne by the child's family.

Please keep your contact information current. The school is not responsible for anything that may happen as a result of incorrect information given upon enrollment or any information that was not updated with our office by email.

The school will not assume responsibility for a child who is not signed in when he/she has arrived for the day.

## LIABILITY RELEASE & ASSUMPTION OF RISK AGREEMENT

The undersigned, parent/legal guardian of \_\_\_\_\_ ("Minor") on behalf of ("Minor") and in consideration of participation in "FIRST DISCOVERIES CHRISTIAN PRESCHOOL", agrees to:

1. Indemnify and hold FIRST DISCOVERIES CHRISTIAN PRESCHOOL its agents and employees, harmless and release them from any and all liability for any injury and/or exposure to illness, including COVID-19; which may be suffered arising out of, or in any way connected with participation in these classes.
2. Prior to participating in the classes, I will inspect the facilities, equipment and areas to be used and, if I believe any of them are unsafe, I will immediately advise the person supervising the area.
3. Assume any risks of personal injuries, including medical or hospital bills, permanent or partial disability, and damage to property, caused by or arising from Minor's participation in this activity.
4. Covenant not to sue or present any claim for personal injury, property damage, or wrongful death against, FIRST DISCOVERIES CHRISTIAN PRESCHOOL its agents and employees, attributable to Minor's participation in the classes.
5. Release, waive, discharge and relinquish FIRST DISCOVERIES CHRISTIAN PRESCHOOL its agents and employees, from any liability, loss damage, claim, demand or cause of action against them arising from or attributable to Minor's participation in the classes, whether the same shall arise by their negligence or otherwise.
6. I authorize FIRST DISCOVERIES CHRISTIAN PRESCHOOL its agents and employees, or other representative of FIRST DISCOVERIES CHRISTIAN PRESCHOOL to use his (her) judgment in obtaining immediate Medical Care for Minor. These persons have my permission to take my son/daughter to the hospital or dentist for the treatment of injury. (Parents will be notified in case of serious illness or injury as quickly as they can be reached, but this makes immediate treatment possible.)

I agree to assign all expenses to my own medical insurance first in the event of any injury sustained by Minor requiring medical attention while participating in FIRST DISCOVERIES CHRISTIAN PRESCHOOL.

7. I acknowledge that FIRST DISCOVERIES CHRISTIAN PRESCHOOL provides Preschool and Spanish Immersion Program and that this program is a licensed childcare program by the State of California in accordance with Department of Social Services Community Care Licensing. FIRST DISCOVERIES CHRISTIAN PRESCHOOL'S license number is 434408891.

THIS DOCUMENT RELIEVES FIRST DISCOVERIES CHRISTIAN PRESCHOOL, ITS AGENTS AND EMPLOYEES, AND OTHERS FROM LIABILITY FOR PERSONAL INJURY, WRONGFUL DEATH AND PROPERTY DAMAGE CAUSED BY NEGLIGENCE. I HAVE READ THIS DOCUMENT, UNDERSTOOD THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN VOLUNTARILY.

Parent/Legal Guardian's Name: \_\_\_\_\_ *By signing you agree to both sections in this page.*

Parent/Legal Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# COVID-19 ~ 1/4/22 *Child's Name* \_\_\_\_\_

*The purpose of this form is to nurture mutual accountability between the parents and the school. We will continue to give our very best to your children. Their wellbeing is our number one priority. Thank you so much for your support and cooperation. Suggestions are welcomed and always please send us any feedback that you feel might help us understand your little ones better or improve our service. Appreciative notes to teachers are always a blessing for them. Praying for you.*

This is new for all of us, so we ask for your patience and understanding when we need to make changes to our procedures, as our student's needs become evident, and we progress in this season. Those 6 and older must wear a mask in our parking lot and facility. Parents agree to bring their child to school and come inside our facility ONLY when they and no one in the household has had symptoms or a positive test to COVID-19 two weeks prior. For everyone's safety inform the school as soon as possible if anyone in your household has a confirmed case or exposure to COVID-19.

- Students may arrive between 8:45am-9:05am. If you notice that you'll be late, please wait until 11am so our teachers can perform the late screening. If you can't please patiently wait outside until our teacher can finish with her group, reassign it to another teacher and come out to screen your little one.
- Sign in/out on our app on your phone at the parking lot. If you forget, sign out at home, and email us so we can fix their time and have accurate records.
- Students bring a washed refillable water bottle and freshly washed plastic closed-toe shoes like crocks or slippers to keep at the school inside.
- You'll drop off and pick up at the gate. Call us at 408.625.3773 (or my cell 408.886.1002, if no answer) when you arrive.
- Please wait in your car or standing on the white parking space dividing line, or by the fence standing 6' apart when another student is getting screened. Thank you for your patience.
- Students are screened at the gate: We'll ask you questions, take your child's temperature and help them carry their things.
- Per school policy, we do not store bags or backpacks.
- Please do not come inside nor ring our doorbell. We can arrange a visit to our facility within our guidelines if needed.
- One parent with each student at the gate. No siblings at the gate when possible. Thanks for helping us minimize exposure for our staff that care for your little one.

At drop-off: Teacher will perform a health screening at the gate and walk your child inside. Please don't bring reusable bags or backpacks; we're not allowed to take any under current guidelines.

At pick-up: If you pick up at 1pm, Teacher will bring students out one at a time. Please wait by your car or on the parking lot white dividing line for your child, they'll come out as they get ready. If you pick up after 3pm, call 408.625.3773 (or my cell 408.886.1002, if no answer) when you arrive and teacher will bring your little one out. If you pick up after 5pm, Teacher may ask you to come inside for pick up when you call. If she invites you in, put sanitizer on before opening the door, wash hands upon entering, and walk into the kitchen. Teacher will screen you and release your little one to you.

New guidelines also come with protocols mandated when symptoms of COVID-19 are present. Please work with your little ones to practice how to cover their sneeze and cough. The symptoms we look for are fever, cough, shortness of breath/trouble breathing, chills, night sweats, sore throat, muscle/body aches, loss of taste or smell, headache, confusion, vomiting, and diarrhea. A child who exhibits or lives with anyone who exhibits any of the symptoms on the list above may not attend. They must wait at least 24 hours after the resolution or improvement of symptoms. They may return to school with a negative COVID-19 test or a medical note by a physician providing an alternative explanation for symptoms and reasons

for not ordering COVID-19 testing. Mandatory Directive from the Public Health Department have no exceptions.

If your family or child have been exposed to large crowds or are unsure if they were exposed to COVID-19, please get tested and keep your child home until you're sure they are negative. If they have any symptoms, they must isolate for 10 days and bring a printed negative test to return to school once symptoms resolve completely.

- In cases a student has close contact with a positive case, which is less than 6 feet for 15 minutes or more, get tested as soon as possible and inform the school the day you find out.
- If the student's test is negative, Quarantine for a full 10 days and test again after day 5 after last exposure. Continue monitoring for symptoms for a full 14 days. If symptoms develop, isolate and test again immediately.
- If the student's test is positive, protocol is for the student to isolate for at least 10 days from date of positive test or, if symptomatic, 10 days from symptom onset AND  $\geq 24$  hours after resolution of fever AND all other symptoms resolve.
- If case is a household member, and the student and caregivers test negative, but are still having contact with the positive case, then their quarantine starts on the last day they had contact with the positive case and extends for 7 or 10 days (depending on test results) from the day the case ends their 10 day isolation period. So if contact can't be completely isolated but they continue to test negative, the student may return 17 days after close contact, with a negative test dated 15 days after the close contact.
- If the student's test is negative and their caregivers have not had contact with the confirmed case since the date of the positive test and during their 10 day isolation period, then Quarantine for a full 10 days and test again after day 5 after last exposure. Continue monitoring for symptoms for a full 14 days. If symptoms develop, isolate and test again immediately.
- Protocol starts over when the student or any of his caregivers have contact with the positive case while they are in isolation.

While we pray daily that this will not happen, given the nature of the health situation we are currently living in, we want to be transparent as possible. All parents understand and accept that, like with any other childhood illness, there is always a risk of exposure to COVID-19 while in school. Despite all our efforts, high standard, and cooperation from parents, our school cannot guarantee that there will be no exposure to COVID-19 or any other illness. If, at any point, we have a confirmed case of COVID-19 reported, parents will be notified immediately, and the school will close for deep cleaning and testing of staff. Staff and students must bring a negative test result or a note from their doctor, clearing them from COVID-19 before returning to school following CDC guidelines.

Sanitizing efforts: Outdoor play structure/slide and playhouses and tables are sprayed with chlorine solution at 1 pm and 5pm. Toys indoors are sanitized after each play with alcohol or chlorine solution before returning to the classroom.

Continue to monitor updated guidelines and information posted at <https://covid19.ca.gov>. We use soap and water most of the time, but once in a while we might use sanitizer, mostly when your child asks for it and upon entering the school.

I authorize my child to use sanitizer, when needed:      Yes      No

*Thank you for your support and cooperation as we continue to do our best to navigate the current health situation.*

I acknowledge understanding and agreement to the COVID-19 guidelines above and any updates sent to me by email while my child attends.

Parent/Guardian Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**IDENTIFICATION AND EMERGENCY INFORMATION  
CHILD CARE CENTERS/FAMILY CHILD CARE HOMES**

To Be Completed by Parent or Authorized Representative

CHILD'S NAME	LAST	MIDDLE	FIRST	SEX	TELEPHONE ( )
ADDRESS	NUMBER	STREET	CITY	STATE	ZIP
					BIRTHDATE
FATHER'S/GUARDIAN'S/FATHER'S DOMESTIC PARTNER'S NAME	LAST	MIDDLE	FIRST	BUSINESS TELEPHONE ( )	
HOME ADDRESS	NUMBER	STREET	CITY	STATE	ZIP
					HOME TELEPHONE ( )
MOTHER'S/GUARDIAN'S/MOTHER'S DOMESTIC PARTNER'S NAME	LAST	MIDDLE	FIRST	BUSINESS TELEPHONE ( )	
HOME ADDRESS	NUMBER	STREET	CITY	STATE	ZIP
					HOME TELEPHONE ( )
PERSON RESPONSIBLE FOR CHILD	LAST NAME	MIDDLE	FIRST	HOME TELEPHONE ( )	BUSINESS TELEPHONE ( )

**ADDITIONAL PERSONS WHO MAY BE CALLED IN AN EMERGENCY**

NAME	ADDRESS	TELEPHONE	RELATIONSHIP

**PHYSICIAN OR DENTIST TO BE CALLED IN AN EMERGENCY**

PHYSICIAN	ADDRESS	MEDICAL PLAN AND NUMBER	TELEPHONE ( )
DENTIST	ADDRESS	MEDICAL PLAN AND NUMBER	TELEPHONE ( )

IF PHYSICIAN CANNOT BE REACHED, WHAT ACTION SHOULD BE TAKEN?

CALL EMERGENCY HOSPITAL       OTHER      EXPLAIN: \_\_\_\_\_

**NAMES OF PERSONS AUTHORIZED TO TAKE CHILD FROM THE FACILITY**

(CHILD WILL NOT BE ALLOWED TO LEAVE WITH ANY OTHER PERSON WITHOUT WRITTEN AUTHORIZATION FROM PARENT OR AUTHORIZED REPRESENTATIVE)

NAME	RELATIONSHIP

TIME CHILD WILL BE CALLED FOR

SIGNATURE OF PARENT/GUARDIAN OR AUTHORIZED REPRESENTATIVE	DATE
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**TO BE COMPLETED BY FACILITY DIRECTOR/ADMINISTRATOR/FAMILY CHILD CARE HOMES LICENSEE**

DATE OF ADMISSION	DATE LEFT
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