

EMERGENCY MEDICAL RELEASE

This form must contain only one child's name, and be the original notarized form.

A new notarized form is required when there is a change in legal guardianship.

Please Print Information

FC-0003 Sample (2/19/20)

Child's Full Name:	Birthda	ate:	
Allergies:			
Medicines Routinely Taken:			
Name of Custodial Parent(s)/Legal Guardian(s):			1
Address: Street Address (number, apartment #, street)			
Street Address (number, apartment #, street)	City	Stat	le Zip Code
Home Telephone Cell Telephone		Work Telephone	
Family Physician's Name/Health Care Resource:			
Address:			
Street Address (number, apartment #, street)	City	Stat	te Zip Code
Telephone ()			
Hospital Preference:		City	,
Medical Insurance Company:			
Policy #:	Expira	tion Date:	
Emergency Contact (if custodial parent/guardian cannot be re	eached):		
Address:Street Address (number, apartment #, street)	City,	Sta	te, Zip Code
Home Telephone Cell Telephone		Work Telephone	e
_			
Sign in the presence of the Notary.			
I hereby give my consent to any emergency facility and physic	cian to adminis	ster necessary treat	ment to my child
	, in the eve	ent of an emergency	y at which time
(Child's Full Name) I cannot be reached. I give consent to transport by ambulance	e if situation w	varrants it.	
Signature of Custodial Parent/Legal Guardian (Affiant)			
STATE OF FLORIDA COUNTY OF	_		
The foregoing instrument was acknowledged before me this	(Month)	(Day)	20 (Year)
by means of $\ \square$ physical presence or $\ \square$ online notarization by $\ _$			_ who is personally known
to me or has produced	(Name of Affia	<i>nt)</i> _as identification.	
(Type of identification)		_	SEAL OF NOTARY
Signed: (Signature of Notary)			



CHILD'S ENROLLMENT RECORD

DIRECTOR'S USE ONLY
Date enrolled

Child's full legal nai	me		Middle		Last	Nickname
Date of Birth				Sex		Nickranie
Primary Hours of C					eek in Care	
Child's Physical Ad	dress					
	Street Address	(number, apartme	nt #, street)	City	State	Zip Code
Family Information:			Child L	_ives with		
Parent's Name			Parer	nt's Name	П	
Address:			Addr	ess		
Home Phone:				-		
Employer:			Empl	loyer:		
Address:	10	0.100	Addr	ess:		
Work Phone				Phone	Cell	
Custody: Mother	Father	_ Both		Other_	Name	
Emergency Contac Child will be released people will also be co accident or emergen	d only to the custon ontacted and are	authorized to	remove t	he child from	the children's center	er in case of illness,
Name						
Home Phone			Ce	ll Phone		
Address	Street Address (nu	mber, apartment #	t, street)	City	State	Zip Code
Name			····			
Home Phone			Ce	ell Phone		
Address						
	Street Address (nu	ımber, apartment f	t, street)	City	State	Zip Code

Please use additional sheet of paper to list name, address and phone number of any other people authorized to pick the child up.

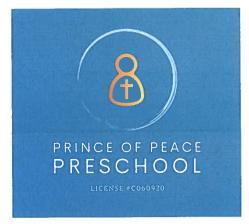
CONTINUED ON BACK

CHILD'S ENROLLMENT RECORD

(Back Page)

Medical Information:

Child's Physician/Health Resource				
Telephone Number	_			
AddressStreet Address (number, apartment #, street)				
			ate	Zip Code
Hospital Preference				
Name of Dentist Telep	hone			
AddressStreet Address (number, apartment #, street)	City	St	ate	Zip Code
				·
Meals typically served while in care:□Breakfast □A	M Snack	□Lunch □PM	Snack	Supper
Emergency Care Plan instructions (if applicable)				
MISCELLANEOUS INFORMATION				
List all known allergies				
List all identifying scars, birthmarks, skin discolorations				
Special medical or dietary needs of child				
List any areas of concern				
My signature below verifies that:				
l give permission to consult the child's physician/he parent/legal guardian cannot be reached.	ealth reso	ource listed abov	e in ca	se of emergency if
I have received a copy of the "Know Your Child's C	hildren's	Center" brochur	e.	
l was notified in writing of the disciplinary and expւ	ılsion po	icies used by the	childr	en's center.
I was provided the food and nutrition policies used	by the ch	nildren's center.		
Your signature below indicates that you have receivenrollment form is complete and accurate. I hereby access to my child's records.				
Signature of Custodial Parent or Legal Guardian				Date



Publicity Release Form

Here at Prince of Peace Preschool, we believe in documenting the growth of our incredible students! We do this through pictures and videos of them playing in centers, creating art, dancing in the classroom, etc.

Sometimes these images/videos are solely used in the classroom/parent portfolios but sometimes they are used for the Prince of Peace Preschool Facebook page or in the Prince of Peace Lutheran Church bulletin/video announcements.

As your child's parent/legal guardian, we always request your permission upon your child's enrollment to our program to make sure you feel comfortable! Please choose whichever option below that you feel the most comfortable with, and we will make sure all staff is aware of your decision.

1.70	and Prince of Peace Lutheran Church May Take or Use Outside of the Classroom (Facebook, Church mes, etc.)
Pictures/Videos of My Child B	and Prince of Peace Lutheran Church May Take <u>OUT</u> Only for Classroom Use May <u>NOT</u> Take Pictures/Videos of My Child
Child's Name	Date
Parent's Written Name	Parent's Signature



Prince of Peace Preschool promotes the use of healthy foods during morning snack, lunch, and afternoon snack! When packing your child's lunch, please keep in mind that we encourage healthy eating, so items like fruit, vegetables, crackers, and sandwiches are greatly appreciated! The following information will give you a little more understanding on what we serve in the classroom and certain restrictions that are in place:

- No cupcakes, cookies or candy will be served with the exception of classroom parties (birthdays, holidays, etc.)
- Morning snack provided will consist of

Choking hazard regulations:

- Per the Pinellas County Licensing Board, "foods that are associated with young children's choking incidents must not be served to children under 4 years of age; such as, but not limited to, whole/round hot dogs, popcorn, chips, pretzel nuggets, whole grapes, nuts, cheese cubes and any food that is of similar ship and size of the trachea/windpipe."
- Please make sure if you are sending hot dogs, grapes, cheese cubes, etc., you are slicing them prior to sending them to school to help us prevent any accidents from occurring!

We appreciate your help and support in allowing us to teach our students the importance of healthy eating habits. When children have the opportunity to learn these habits at a young age, they are more likely to continue eating well-balanced, healthy meals and snacks as they grow older!

I have read, understand and agree to the above statements and restrictions.		
Child's Name	Date	
Parent's Written Name	Parent's Signature	



Food Experience Permission Form

I give permission for my child	to participate in		
food related activities.			
Please check one of the following:			
My child DOES NOT have a foo	d allergy or dietary restriction.		
My child DOES have a food allergy or dietary restriction. He or she may			
participate, but may not eat or handle the follo	owing items (please list below)		
My child DOES have a food alle	rgy or dietary restriction. He or she may		
not participate in activities.			
Parent Signature	Date		

PRINCE OF PEACE PRESCHOOL

LICENSE #C060920

Authorization Form

I grant permission for the staff of Prince of Peace Preschool to apply the following items, which <u>I have provided</u> to the school, to my child as needed in the course of the school day.

Diaper Cream		
Sunscreen		
Child's Name	 Date	
Parent's Written Name	Parent's Signature	



Student Illness Policy

Here at Prince of Peace Preschool, we strive to ensure our students and staff can learn and work in a safe, healthy environment. While precautions are taken to protect your child against illness, most children experience a normal number of infections and illness throughout the year. Should your child become exposed to an infectious disease while in child care, we will notify you promptly. In return, we request that you report to us when your child has been exposed to an infection or disease outside of the center. The following policies have been put in place to allow us to maintain a safe, healthy environment for all individuals in our center:

- 1. Staff will be trained to recognize the common signs of communicable disease and other illness through First Aid training. All staff will be trained in proper hand washing and disinfecting procedures, as a part of their initial training.
- 2. A child with any of the following signs or symptoms of illness shall be immediately isolated and their parent/guardian will be notified to promptly pick their child up (within one (1) hour of initial phone call):
 - a. Diarrhea (more than 3 abnormally loose stools in a 24-hour period)
 - b. Vomiting
 - c. Severe coughing, causing the child to become red or blue in the face or to make a whooping sound
 - d. Severe sore throat
 - e. Difficult or rapid breathing
 - f. Yellowing skin or eyes
 - g. Conjunctivitis (pink eye), or yellow/green mucus draining from the eyes
 - h. Body temperature of 100.4 degrees Fahrenheit or higher
 - i. Untreated infected skin patches
 - i. Scabies
 - ii. Hand, Foot and Mouth Disease (No draining blisters may be present upon return)
 - iii. Impetigo (No open sores may be present upon return)
 - j. Lice (No live bugs or nits may be present upon return)
- 3. Those children experiencing minor cold symptoms, but not exhibiting any of the symptoms specified above, are classified as mildly ill children. It is our policy to care for mildly ill children if the parent has been notified of the child's condition. The children will be monitored for worsening conditions or symptoms that would result in the child's pick-up.
- 4. When a family is notified that their child(ren) need to go home due to illness, an authorized adult must pick up the child(ren) within one (1) hour of the notice.

Readmittance After Illness

Your child will be readmitted to class after he/she has been symptom free for a **24-hour** period. This means they must have been without a fever for **24 hours** without fever reducing medicine. If your child was sent home due to a communicable disease (Hand, Foot and Mouth Disease, Impetigo, Pink Eye, etc.) a note from their pediatrician must be presented upon their arrival at school that clarifies they are no longer contagious.

Child's Name	Date
Parent's Written Name	Parent's Signature

Prince of Peace Preschool

Discipline Policy

Praise and positive reinforcement are effective methods of promoting positive behavior in young children. When children receive positive, non-violent, and understanding interactions from adults and others, they develop good self-concepts, problem solving abilities, and self-discipline. Based on this belief, Prince of Peace Preschool uses a positive approach to discipline and practices the following discipline and behavior management techniques:

We Do:

- Communicate to children using positive statements (use inside voices, use kind words, use listening ears, use helping hands, use walking feet, etc.)
- Communicate with children while on their level (squat/sit/lean to their eye level)
- Talk with children in a calm manner
- Explain why their action may have been a not nice choice
- Praise and encourage children
- Set limits for the children
- Apply rules consistently
- Set up the classroom environment to prevent problems
- Redirect a child to an acceptable activity if there is a problem
- Give children opportunities to make choices and solve problems
- Help children talk out problems and think of solutions
- Listen to children and respect their needs, desires and feelings
- Provide appropriate words to help solve conflicts
- Use storybooks and discussions to work through common conflicts

We Do NOT:

- Inflict corporal punishment in any manner upon a child (Corporal punishment is defined as the use of physical force to the body as a discipline measure. Physical force to the body includes, but is not limited to, spanking, hitting, shaking, biting, pinching, pushing, pulling, or slapping.)
- Use any strategy that hurts, shames or belittles a child
- Use any strategy that threatens or intimidates a child
- Use or withhold food as a form of punishment
- Use of withhold physical activity as a form of punishment
- Shame or punish a child if a bathroom accident occurs
- Embarrass a child in front of others
- Compare children
- Place children in a locked and/or dark room
- Leave any child alone, unattended or without supervision
- Allow discipline of a child by other children
- Criticize, make fun of, or otherwise belittle a child's parent, families, or ethnic groups

Note: If, at any point, there is an indication/suspicion that a child has special needs, the Prince of Peace Preschool director will inform the child's family and contact either R'Club Services or the Early Learning Coalition (ELC) for assistance, evaluations, and recommendations for the child's future care needs. Conferences will be scheduled with parents if challenging behaviors occur. Please see the Prince of Peace Preschool Expulsion Policy for more information regarding challenging behaviors.

My signature below indicates that I have received, read, and agr	ree to the guidelines mentioned above in the Prince of
Peace Preschool Discipline Policy.	
Child's Name:	Date:

	
Parent's Written Name:	Parent's Signature:

Prince of Peace Preschool

Expulsion Policy

Thank you for choosing Prince of Peace Preschool to support your child's development! We are committed to providing a safe, nurturing environment conductive for learning and growth for all our children. We strive to ensure all our children are set up for success regardless of their need or developmental level.

Unfortunately, sometimes there are reasons we must suspend (short-term basis) or expel (permanent basis) a child from our program. We want you to know that we will do everything possible to work with the family of the child(ren) in order to prevent this policy from being enforced! However, Prince of Peace Preschool reserves the right to cancel the enrollment of a child for the following reasons, not limited to, but including:

- Non-payment or excessive late payment of fees/tuition
- Failure to adhere to policies and procedures outlined in the Parent Handbook
- The child has needs which we cannot adequately meet with our current staffing patterns
- The child's behavior threatens the health and safety of him/herself, another child or staff members
- The parent/guardian exhibits behavior which is detrimental to the health and well-being of the children and staff in a classroom or negatively interferes with the normal functioning of the classroom and/or program. This includes but is not limited to vulgarity, intimidation, harassment, or violation of childcare licensing regulations.
- Habitual tardiness when picking-up

Positive behavior interventions will be used as proactive actions will be taken in order to prevent expulsions including but not limited to the following:

- Screenings
- Classroom/environment assessments
- · Reaching out to inclusion specialists, specialized care teams, or mental health consultants
- Staff will try to redirect child from negative behavior
- Staff will teach child appropriate skills to address challenging behaviors
- Staff will reassess the environment, activities, and supervision
- Staff will always use positive methods and language while discipling children
- Staff will celebrate appropriate behaviors
- Staff will always maintain strong connections with all children
- Staff will consistently apply consequences for rules
- Staff will always notify parents of their child's disruptive behavior that may lead to expulsion
- Director and parent will have a conference to discuss how to promote positive behavior
- A specialize care team will be formed to address how to best support the child

Communication with Parents – Fostering a positive relationship between staff and families will allow us to better help a child with challenging behaviors. Both the staff and families agree to the following items to ensure we are all doing our best to help the child:

- Communicate regularly with staff to ensure consistency in guidance between home and school
- Make sure children are present at school every day to allow us to have the time to work with all children, including those needing higher levels of support, as schedules are key to controlling challenging behaviors
- Understand and acknowledge that we do not just simply expel children while they are leaning these life skills. We strive to service individual needs while ensuring the safety of all our students and staff. Expulsion is **only** used as a last resort
- To best serve children, we may need to partner with social and emotional experts to help give a child the best foundation for academic and life success

If a transition to another provider becomes necessary, the Prince of Peace Preschool staff will do their best to work with families to seek the best care for their child. This may include receiving preschool recommendations from local resources that are better equipped to handle extremely challenging behaviors. Parents will be given a minimum of one (1) week notice that their child will no longer be eligible for enrollment at Prince of Peace Preschool.

By signing this document, you understand and agree to the terms above.

Child's Name:	Date:
Parent's Written Name:	Parent's Signature: