



Today we learn, toMORROW we lead!

Child Enrollment Form

Entrance Date _____ **Withdrawal Date** _____

Child's Name: _____ Sex: _____ Age: _____ Date of Birth _____

Home Address (Street) _____

City _____ State _____ Zip _____

| | | | |
|---|--|---|--|
| MOTHER'S NAME | | FATHER'S NAME | |
| Address | | Address | |
| Home # | | Home # | |
| Cell # | | Cell # | |
| E-Mail address: | | E-Mail address: | |
| Place of Employment and Employer's Address | | Place of Employment and Employer's Address | |
| Work # | | Work # | |

Living Arrangement () Both Parents () Mother () Father () Other _____

Legal Guardian () Both Parents () Mother () Father () Other _____

This child **MAY BE RELEASED TO** the person(s) signing this agreement and the following:

| Name | Address | Phone # | Relationship |
|-------------|----------------|----------------|---------------------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |



Persons to **CONTACT IN CASE OF EMERGENCY** when parents cannot be reached:

| Name | Address | Phone # | Relationship |
|------|---------|---------|--------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

Name of Public or Private School child attends, if any: _____

Child's Doctor or Clinic name _____

Doctor/Clinic Phone Number _____

My child has the following special needs _____

The following **special accommodation(s)** may be required to most effectively meet my child's needs while at the center: _____

My child is currently on medication(s) prescribed for long-term continuous use and/ or has the following preexisting illness, allergies, or health concerns: _____

EMERGENCY MEDICAL CARE AND AUTHORIZATION

Should (child's name) _____ Date of Birth _____

suffer an injury or illness while in the care of **Morrow Early Learning Center** and the facility is unable to contact me (us) immediately, it shall be authorized to secure such as medical attention and care for the child as may be necessary. I (We) shall assume responsibility for payment for services. I hereby grant permission for **Morrow Early Learning Center** and its employee's full authority to take whatever actions they deem necessary regarding my child's health and safety in the event I cannot be reached or in the situation where time is of the essence; and fully release **Morrow Early Learning Center** and its employees from any liability in connection with those decisions, I grant permission for emergency treatment by a rescue squad, private physician and/ or hospital or emergency health care facility staff if needed. Any such action will be taken in the best interest of my child and will be reported to me as soon as possible. **I HAVE READ AND UNDERSTAND THIS ON-SITE CONSENT AND WAIVER FORM AND SIGN VOLUNTURAILY AND ENTIRELY OF MY OWN FREE WILL. EMERGENCY MEDICAL CARE**

Parent/Guardian Signature _____

Date _____

Facility Administrator/ Person-in-charge _____

Date _____



LIABILITY RELEASE WAIVER

In consideration of my child's participation in the programs and activities offered by Morrow Early Learning Center LLC ("Center"), I hereby agree to the following:

I/We, the undersigned, are the parent(s) of the above named child/children and we agree, in taking advantage of this child care services, to release and hold harmless **Morrow Early Learning Center LLC** from any and all claims, demands, suits, cost, and charges in connection with or arising out of the child care service, including, but not limited to bodily harm or injury to our children, except only for loss, harms or injury occasioned by gross negligence or intentional misconduct **Morrow Early Learning Center**. **Release of Liability:** I release, discharge, and hold harmless the Center, its officers, directors, employees, volunteers, and agents (collectively, the "Released Parties") from any and all liability for any loss, personal injury, or death arising out of any injury or accident sustained by my child, except for injuries or accidents that are the direct result of the Released Parties' negligence. **Assumption of Risk:** I understand that there are inherent risks associated with childcare activities, including, but not limited to, risks associated with:

- Marked and unmarked obstacles
- Surfaces with ice (if applicable)
- Interactions with other children
- Playing, eating, and sleeping in a childcare environment
- Exposure to allergens
- Taking/ attending field trips

I acknowledge that injuries are a possibility during childcare activities and voluntarily choose to allow my child to participate.

Name (please Print): _____

Parent/Guardian Signature: _____ **Date** _____

Authorization to dispense External Preparations
590-1-1-.20(1)

Parental Authorization. Except for first aid, personnel shall not dispense prescription or non-prescription medications to a child without specific written authorization from the child's physician or parent. Such authorization will include, when applicable, date; full name of the child; name of the medication; prescription number, if any; dosage; the dates to be given; the time of the day to be dispensed; and signature of parent.

I give Morrow Early Learning Center, permission to apply one or more of the following topical ointments/preparations to my child in accordance with the directions on the label of the container.

- _____ Baby wipes
- _____ Band-aids
- _____ Neosporin or similar ointment
- _____ Bactine or similar first aid spray
- _____ Sunscreen
- _____ Insect Repellent
- _____ Non-Prescription ointment (such as A& D, Destin, Vaseline)
- _____ Baby Powder
- _____ Other (please specify) _____

Parent/Guardian Signature _____ **Date** _____



PARENTAL AGREEMENT WITH MELC CHILD CARE

Morrow Early Learning Center agrees to provide childcare for (Name of Child) _____ on _____ (Days of the Week) _____ from _____ A.M. to _____ P.M. (not to exceed 10 hours) from _____ (Month/Year) to _____ (Month/ Year) (usually one year).

My Child will participate in the following meal plan (**Circle applicable meals and snacks**):

Breakfast
Lunch
Afternoon Snack
Dinner

Parent agrees to the following:

Before any medication is dispensed to my child, I will provide a written authorization, which includes, date; name of child; name of medication; prescription number; if any; dosages; date and time of day medication is to be given. The medicine will be in the original container with my child's name marked on it.

My child will not be allowed to enter or leave the facility without being escorted by the parent(s), person authorized by parent(s), or facility personnel or released to anyone under the age of 18 years old.

I acknowledge it is my responsibility to keep my child's records current to reflect any significant changes as they occur, e.g. telephone numbers, work location, emergency contacts, child's physician, child's health status, infant feeding plan and immunization records, etc.

Morrow Early Learning Center agrees to obtain written authorization from me before my child participates in routine transportation, field trips, special activities away from the facility, and water-related activities occurring in water that is more than two (2) feet deep.

The facility agrees to keep me informed of any incidents in a timely manner, including of any incidents, including illnesses injuries, adverse reactions to medications, etc., which include my child.

HEALTH AND ILLNESS POLICY

We understand that illness is a normal part of life for all of us. We believe, however, that school is a place for well children. While keeping your child home when he/she is ill, other students are much less likely to become ill themselves, thus contributing to the overall good health of the group. In cases when children have symptoms of COVID-19 (fever 100.4 or higher, coughing, etc. parents must pick-up ASAP).

We have taken the following steps to decrease the likelihood of your child becoming ill by contacting germs from other children.

- Infrared fixtures on appliances
- Toys constantly disinfected with bleach solution
- Counter and tabletops disinfected continually
- Supervised hand washing throughout the day
- High quality toys that are easy to disinfect
- Constant training of staff to prevent the spread of germs
- Laundry and dishwashing equipment with extremely high temperature disinfecting cycles
- Use of individual cots as opposed to mats which rest directly on the floor



These steps help to cut down on the spread of germs, but as you know, children will at times become ill. We ask for your full cooperation in evaluation whether your child should go to school when they are not feeling well. You will know best if your child should stay home for the day. **We ask that you make that decision based on how you would want fellow parents to make the same decision.**

If your child displays any of the following symptoms accompanied by fever of over 100 degrees, or has a fever alone of 101 or higher, you will be contacted by the administrative staff to come pick up your child preferably **within one hour**.

- Vomiting
- Diarrhea (twice within one hour)
- Unusual spots or rashes
- Red, irritated throat or trouble swallowing
- Discolored urine or stools
- Severe itching and scratching
- Infected skin patches
- Unusual behavior: cranky/ lethargic/obvious discomfort

Children may return to school 24 hours after being symptom free. For example, if your child leaves school on Monday, plan on his/her return no sooner than Wednesday. If you feel that your child is feeling better and may return sooner, simply have his/her doctor send us a note stating that the child is not contagious.

Parent/ Guardian Signature _____ Date _____

DISCIPLINE POLICY

Positive Re-Enforcement- children are given praise and reward for appropriate behavior. Sometimes teachers use stickers and treasure chest toys for rewards.

Verbal Warning- this will act as a reminder of the rule that the child is disobeying. This helps the child who has forgotten the rule.

Parent Contact- If a child's behavior is severely disruptive, the parent will be notified on the day of the incident. We will talk with the parent so that we can decide together, what is best for the child.

Suspension- Once all the above disciplinary actions have been taken Morrow Early Learning Center can suspend the child for up to 3 days. Physical altercations are an immediate suspension or termination depending on the severity of the incident.

Immediate Termination- if a child's behavior becomes harmful or physical to the teacher or other children, the parent will be immediately notified to pick up the child. We reserve the right to dismiss the child at any point if the child's behavior is inconsolable.

Biting - If your child is **excessively biting others MELC reserves the right to terminate your childcare services immediately for the safety of other enrolled children.**

AT NO TIME WILL FORCE OR CORPORAL PUNISHMENT BE USED AT MORROW EARLY LEARNING CENTER.

I have read and understand the discipline policy. I have discussed the rules and consequences with my child.

Parent/ Guardian Signature _____ Date _____



CHILD ALLERGY AND FOOD INFORMATION

(please PROVIDE doctor/ medical verification of ALL indicated allergies)

Child's Name: _____

| SUBSTANCES | <u>IS ALLERIC</u> | <u>IS NOT ALLERGIC</u> | NOT SURE |
|------------------------------------|-------------------|------------------------|----------|
| Peanuts | | | |
| Other nuts and seeds | | | |
| Citrus fruits | | | |
| Other fruits | | | |
| Cow's milk | | | |
| Yogurt | | | |
| Other dairy (please list): | | | |
| Corn | | | |
| Oats | | | |
| Wheat | | | |
| Other grains | | | |
| Yeast | | | |
| Egg yolks/ Egg whites | | | |
| Soy foods (COOKED WITH INGREDIENT) | | | |
| Fish/ shellfish | | | |
| Dust | | | |
| Cats | | | |
| Dogs | | | |
| Other animals | | | |
| Pollen | | | |
| Bee Stings | | | |
| Penicillin | | | |
| Latex | | | |
| Other (please list): | | | |
| Other (please list): | | | |

SPECIAL MILK REQUEST (Doctor note required): _____

- PLEASE NOTE THERE IS A **\$5** WEEKLY MILK FEE

Parent/Guardian Signature _____

Date _____

Staff / Administrator signature: _____

Date _____



MELC PERMISSION TO PHOTOGRAPH/VIDEO

I/WE (Parent/ Guardian), _____
 (Parent's or Guardian's Name)

Give permission for **Morrow Early Learning Center, 5881 Phillips Drive #2 Forest Park, GA 30297** to photograph/ and or video **my child/ren:**

NAME OF CHILD/REN: _____

For the following purposes:

| Type of Use | Grant Permission | Decline Permission |
|--|------------------|--------------------|
| Still Photographs: | | |
| Display in provider's personal scrapbook or bulletin boards in classrooms and hallways, other families, legal representatives, State of GA representatives, etc. | | |
| Morrow Early Learning Center's social media platforms: Facebook, Instagram, or Twitter or Tic Tok | | |
| Display in (MELC) facility's website* | | |
| Use still photos in promotional materials | | |
| Community partner representatives, such as Hand, Heart & Soul, Clayton County Collaborative agencies | | |
| Professional photography companies for school and class pictures that the center use for service | | |
| Videos: | | |
| Display video on (MELC) facility website and promotional materials | | |
| Local law enforcement, legal representatives, State of GA representatives, etc. MANDATORY | | |
| Enter and send pictures in the PROCARE system and Procure app | | |
| Morrow Early Learning Center's social media platforms: Facebook, Instagram, or Twitter or Tic Tok | | |
| Other (please list): | | |
| | | |
| | | |
| | | |

*Only first names and possibly last initials (in the event of two or more children with the same first name) will be displayed on the facility's website.

*In accordance with local, state and federal guidelines/laws, in cases of suspected abuse or neglect MELC reserves the right to take photographs/ videos of children in our care for the purpose of cooperating with local, state and federal government officials in efforts to protect children that may be in risk of danger, harm or neglect

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

Parent / Guardian Signature: _____ Date: _____

Staff Signature: _____ Date: _____





*******Parent Enrollment Contract*******

1. The center hours are from 6:30 AM to 6:30 PM. Parent must abide by their parent agreement form indicated hours or they may be subject to time extension fees of \$20.00 per hour for overage. My child cannot attend outside of the agreed upon times of my (10) hour window period of care, ex. 6:30am to 4:30pm)
2. Payment obligation is based on the hours agreed to use childcare, not necessarily actual hours of attendance. Payment is due if you have agreed to use certain blocks of time, whether the child attends during those hours, limited to 10 hours or less of care
3. The center observes the following days as holidays with staff pay, when they fall on a weekday: (New Year's Eve and New Years, Memorial Day, Juneteenth, July 4th, Labor Day, the day before and day after Thanksgiving, and Christmas Eve, Christmas Day and two Staff development/ Training days per year. In addition to these, on New Years Eve, Good Friday we will be closed and may include other days/holidays not listed. Each parent will receive a school calendar for the upcoming school year. Tuition payments are due weekly regardless of closure dates for holidays, inclement weather, etc.
4. Payment is paid on a pre-payment basis. **Payment is to be made before or at pick-up every Friday (for the following week), if payment is not received by 6:30 PM on Friday evening there will be a \$25.00 late fee** added to the payment. Payments may be made with cash, money order, or a debit/credit card.
5. If your child will not be showing up, or arriving late, we would greatly appreciate a phone call by 8:00 AM. I understand **my child should be dropped off by 9:00 AM** unless he/she has an appointment.
6. **A daycare space will not be held for a child who is gone on vacation, when the day care is in session, unless pre-payment is made to hold the spot. You must pay for your contracted hours whether he/she is here or not.**
7. If your child is sick, (throwing up, fever of 100 +, chicken pox, diarrhea, etc...) your child **CANNOT** be brought to the daycare under these conditions. This means if your child attends school, and your child is too sick to go to school, your child is too sick to come to daycare. This also means if your child is sick through the night, the child cannot be brought to the daycare. If your child does become sick while under our care, we will notify you to have the child picked, and please do as soon as possible. (There are state laws that require sick children to be isolated from other daycare children, and to not allow sick children into the daycare.) In addition, if your child has COVID 19 symptoms they will no be admitted into the facility, ex. 100.4 temperature, coughing, etc.
8. State regulations states that prescription medications or aspirin shall not be given to a child, except as authorized by a licensed physician, and with written daily request from the parent or guardian. Non-Prescription medication may be given to a child only with a written daily request. The medication should be in the original containers, with your child's name and current expiration date.
9. State regulations require that each child's medical history, along with authorization for medical care, permission slip for trips, be signed by the parent or guardian, and left with the daycare provider at the time



of enrollment. And, that a copy of the child's current immunization certificate, showing the child is immunized in accordance with state regulations. This shall be on file within thirty (20) days of enrollment. All forms are subject to a yearly renewal and must be kept up to date.

10. The center must have numbers where the parents or guardian can be reached, plus numbers of a personal physician or clinic. It is extremely important that these numbers be kept current, so that we may reach you when necessary, not just doing emergencies.
11. Parents must sign an emergency medical release form. In the event of a medical emergency concerning your child, we will make every effort to contact you. In case you are not able to be reached, we must have these signed, and kept on file to get medical attention for your child.
12. Please notify us at once if you find out that your child has a contagious disease, so that the staff and the parents of the other daycare children in our care may respond appropriately. We will also notify you if your child has potentially been exposed to any contagious illness.
13. **Please inform us any allergies that your child may have!! Any meal/ diet accommodations must be have a doctors note on file.**
14. We will release daycare children only to their parents or guardian, or to persons authorized by their parent or guardian in writing. (If staff has never met the person, they will have to show some form of I.D.)
15. We need each child to have an extra set (preferably three) of clothing, a complete set) that can kept at the center in case of accidents. (Such as potty mishaps, spills or soiled.) All items should be labeled with the child's name. We cannot be responsible for the lost unlabeled articles.
16. The parents are expected to provide everything would be needed for an infant. i.e. (bottles- must be labeled and dated for each day, disposable diapers, formula, wipe's, spit/burping towels, oral gel, bibs, etc.) state regulations states that the formula shall be prepared by the parent or guardian. LABEL everything bottle tops, bottles, creams, etc.
17. It is expected that each child be respectful to our personal property. A certain amount of wear and tear is normal, you will be required to replace any object or its value, if your child has "maliciously" broken or damaged any personal property in the center.
18. An afternoon quiet time will be observed between 12:00 PM and 2:00 PM. So that the children can get their rest. Your child will be required to observe the quiet time (quiet activity) or sleep during this time.
19. MELC staff will use re-direction, time out and positive re-enforcement discipline techniques for behavior management, please feel free to ask us any questions regarding our methods.
20. No personal toys, gum, sweets, or food shall be brought into the daycare. As this is not fair to the other children in the day care. If your child has a favorite blanket (security), or stuffed animal that he/she sleeps with, your child will be able to bring it into the daycare, with understanding it will be put up until nap time.
21. We will give you a two (2) weeks' notice if we can no longer take care of your child. We ask for the same notice. If it does become necessary to remove your child without a two (2) weeks' notice, you are still liable for two (2) weeks of childcare services, based on the fee agreed upon at the time of enrollment. We do reserve a shorter period of time for
22. In accordance with GA laws, MELC is not responsible for any COVID related illnesses, injuries, including death if exposure has taken place within the center.





I acknowledge that I received a copy of Morrow Early Learning Center CHILD ENROLLMENT CONTRACT.

I have read it and agree to its conditions.

Parent (s) or Guardian Name (s) (Print)

Date

Signature of Parent or Guardian

Date

Signature of Parent or Guardian

Date

MELC STAFF PRINT & SIGNATURE

Date



MELC Right of Termination of Child Care Services Notification Form

**The center reserves the right to terminate your child's enrollment under the following circumstances/
reasons.**

- Non -payment for your childcare services and/or lack of adherence to tuition payment policies.
- Parents falsify information on enrollment forms or otherwise knowingly falsify information.
- Parents do not follow and comply with the policies set forth in the Parent's Handbook. In addition, not bringing the essential daily hygiene needs for the child (wipes, diapers, change of clothes, etc.) after repeated requests from the child's teacher and the administrative staff.
- Lack of parental cooperation with the policies set forth in the Parent's Handbook.
- Lack of parental cooperation with the center's efforts to resolve differences and/or to meet the child's needs through parent/staff meetings or conferences.
- Inappropriate or abusive behavior and/or verbal abuse or threats by parents, relatives, guardians or other parties onward the center staff, other parents or children
- Inability of parents to deal in a professional manner with center personnel or other parents and children at the center
- The continued enrollment of the child poses a risk to the health and/or safety of other children, parents of center staff members or continued enrollment of the child constitutes an undue burden on the center's resources.

I have read and understand the Termination of Service Police of Morrow Early Learning Center.

Parent Signature

Date



What will my child need???????

Change of clothes (3 sets of weather appropriate clothes)

Small throw blanket (please do not bring large blankets)

4x6 Family Picture

Infants/ Toddlers: all personal care items (diapers, wipes, bottles, sippy cups, etc.)

EVERY item should be labeled

Box of Tissue

BELOW ITEMS ARE OPTIONAL: (PRESCHOOL & PREK students)

Binder: 10 Dividers, 30 sheet protectors (inside the binder)

2 Boxes of 24 count crayons

6 JUMBO glue sticks

3 Boxes of Kleenex

2 Packs of multicolored construction paper

4 (3) prong folders

4 preschool handwriting tablets

1 pack of colored pencils

6 #2 writing pencils

3 dry erase markers

2 packs of white copy paper

Index Cards and Index card Box

Magazine

Clorox Wipes

Pencil Box



Vehicle Emergency Medical Information

Child's Name _____

Date of Birth _____

Address _____

Father's Name _____

Home Phone _____ Work Phone _____

Mother's Name _____

Home Phone _____ Work Phone _____

Person to notify in an emergency and parents cannot be reached:

Name _____

Phone _____

Child's Doctor _____ Phone _____

Medical Facility the center uses _____

Address _____

Child's Allergies _____

Current prescribed medication _____

Child's special needs and conditions _____

In the event of an emergency involving my child, and if **Morrow Early Learning Center** cannot get in touch with me, I hereby authorize any needed emergency medical care. I further agree to be fully responsible for all medical expenses incurred during the treatment of my child.

Child's Name _____

Signature (Parent/Guardian) _____ Date _____

Witness By _____ Date _____



MELC Weekly Tuition and Fee Agreement

Family Name: _____

Child's Name: _____ DOB: _____

Registration fee: \$75* _____ (at registration and thereafter annually)

Infants: \$265* _____

Toddlers: \$250* _____

Preschool: \$225* _____

PreK: \$225* _____

Drop-In \$75* _____

Potty training fee: \$10* _____

Special Milk (doctor's note ONLY): \$5 _____

Before Care: \$75* _____ After Care: \$155 _____

School Age Breaks and Summer (Full time) Weekly Care: \$175* _____

Other: _____ \$ _____

*fees are subject to change each school year

Payment Policies

- Tuition is due weekly on Friday before the close of business (6:30pm)
- **Daily late pick-up fees are \$3 per minute**
- Over the time (10 hours) limit fees are (\$25 per hour)
- Payments will be made via convenient automatic draft via ACH from your checking account at no charge by automatic credit card or checking account. Credit card transactions will have a 3% transaction fee.
- A fee of \$30 will be charged for all ACH returns.
- You are responsible for full payment regardless of attendance due to vacation, illness, COVID or weather-related issues.
- Each eligible family will receive (1) discounted week of vacation per calendar year, after one consistent year of full-time enrollment. The vacation discount is 50% off the weekly rate and can be used when a child is absent for an entire calendar week.
- **A two-week written notice is required if you choose to withdraw your child from our program for any reason. The notice is not effective until in writing to the director. Parents will be responsible to paying for the last two weeks if notice is not received.**

I have read and agree to the terms of this tuition and fee agreement.

Responsible Signature Party: _____ Date: _____

MELC STAFF: _____ Date: _____



Confidentiality Notice

Childcare professionals at Morrow Early Learning Center respect the privacy of enrolled children and their parents. Substitutes and volunteers who participate in our program are expected to do the same. We believe that violating privacy may damage the positive self-esteem of parents and that of their child. We believe that all information concerning children and their families is of an extremely sensitive nature and should be respected. We expect that all substitutes and volunteers in our program will do likewise and keep all personal and sensitive information about our children and families completely confidential. In addition, we expect all volunteers and substitutes to report only pertinent information to the proper Morrow Early Learning Center staff.

Confidentiality Agreement for Morrow Early Learning Center

WHEREAS, childcare professionals respect the privacy of enrolled children and their parents and, WHEREAS, violating his/her privacy may damage the positive self-esteem of parents and that of their developing child,

WHEREAS, all information concerning children and their families shared is of a very sensitive nature and should be respected,

I agree to keep ALL INFORMATION discussed in private in total confidence,

I further agree that I will keep all personal and sensitive information disclosed by adults completely confidential and will report only pertinent information to the proper authorities.

Acknowledgement of Orientation and Receipt of Parent Handbook

The Parent Handbook is the official handbook for enrollment policies and procedures for Morrow Early Learning Center. In it we have attempted to cover situations normally expected to arise during your child's enrollment with us. Because Morrow Early Learning Center is not able to anticipate all situations that might arise, nor anticipate all the questions that would be raised regarding policy, this handbook was designed to be fluid and meet needs as they arise. Management reserves the right to amend these policies, as necessary. Any amendments will be made in writing and distributed to parents and staff.

Parent's Acknowledgement

I have read and understand the Parent Handbook. I understand that any departure from the policies, rules, and procedures will be considered a violation of program policy and could result in disciplinary action up to and including termination of my participation in this program. I understand that I will be notified of any changes in policies, rules, and procedures, and that it is my responsibility to read and maintain copies of any such changes.

The current version of the Parent Handbook was revised in October 2020. This is the version that I am receiving. This handbook contains the Parent Rights and Responsibilities, as well as the Confidentiality policy.

The parent's signature acknowledges receipt of a copy of the Parent Handbook and indicates an agreement to uphold the policies of Morrow Early Learning Center.

Print Parent Name _____

Parent Signature _____ Date _____

