

Student Information

(updated 7/6/2023)

Enrollment Date:_____ Start Date:_____ Password:_____

Child's Full Name:_____ (First, Middle & Last)

Date of Birth:___/___/___ Age___ Name child goes by_____

Preschool Full Time (under five)___ Preschool Part Time (2-4)___ VPK Only___ VPK Full Time___

School Age: School's Name:_____ Current Grade:_____

Before Only:___ After Only:___ Before & After:___ Summer/Drop In:___

Family Information

Please check box where child resides

Father's Name:_____

Address:_____ City_____ State_____ Zip_____

Telephone: Home_____ Cell_____ Work_____ Ext._____

Employer:_____ Address:_____

Email Address:_____

Mother's Name:_____

Address:_____ City_____ State_____ Zip_____

Telephone: Home_____ Cell_____ Work_____ Ext._____

Employer:_____ Address:_____

Email Address:_____

Emergency Contact & Pick Up List

Please list at least four options

Name:_____	Relationship_____	Phone_____	Phone_____
Name:_____	Relationship_____	Phone_____	Phone_____
Name:_____	Relationship_____	Phone_____	Phone_____
Name:_____	Relationship_____	Phone_____	Phone_____
Name:_____	Relationship_____	Phone_____	Phone_____
Name:_____	Relationship_____	Phone_____	Phone_____
Name:_____	Relationship_____	Phone_____	Phone_____

Connection Kids Verification Form

Know Your Child Care Center:

Section 65C022.006(4) of the Child Care Standards requires that parents receive a copy of the child care facility brochure, "Know Your Child Care Center". The parent/guardian verifies receipt of the childcare brochure (included with this packet)



Parent/Guardian Signature

Date

Printed Name of Child

Disciplinary Policies

Section 65C022.006(4) of the Child Care Standards requires that parents be notified in writing of the disciplinary practices used by the childcare facility. The parent/guardian verifies receipt of the disciplinary practices of the childcare facility (inside the parent handbook, included with this packet)

I _____, have received a copy of the disciplinary practices used by the facility.

Parent/Guardian Signature

Date

Printed Name of Child

Verification of Receiving School Handbook

I received a copy of the Connection Kids Parent Handbook and agree to abide by all policies set forth in it.

Parent/Guardian Signature

Date

Printed Name of Child

Permission to Photograph

I do___/I do not___ give permission for my child to be filmed or photographed individually or as a group while participating in activities at or with Connection Kids and further to the publication of photographs/film in Connection Kids' brochures, newsletters, or online, newspaper, or on television.

Parent/Guardian Signature

Date

Printed Name of Child

Acknowledgment of Facility Holidays

I understand that all Connection Kids facilities will be CLOSED in the following days:

Good Friday, Independence Day, Labor Day, Thanksgiving (3 days), Christmas Vacation(Christmas Eve-New Years Day, and Memorial Day.

Parent/Guardian Signature

Date

Printed Name of Child

Severe Weather Closings

In case of Severe Weather or any type of National/Local disaster, we will follow the Brevard County Public School System regarding openings or closures. This will be announced on your local television or radio stations. If there are any severe weather/disaster announcements that result during the day in any school closings, YOU MUST PICK UP YOUR CHILD IMMEDIATELY. If weather conditions become severe, you may be called to pick up your child. Severe conditions include but are not limited to: hurricanes, tropical storms, tornado, fire, or any national.local disaster. Connection Kids will return to business when the Brevard county Public School System reopens.

Parent/Guardian Signature

Date

Printed Name of Child

CONNECTION KIDS

TUITION & PAYMENT AGREEMENT (UPDATED 7/6/2023)

I, the undersigned parent or legal guardian of _____, do register my child for the year of _____ at Connection Kids. I understand and accept the following agreements:

- Wait List Fee: I agree to pay a non-refundable wait list fee of \$50, to be placed on the Connection Kids wait list for enrollment in the desired classroom.
- Registration & Weekly Tuition: I agree to pay a non-refundable registration fee and weekly tuition as indicated below. Tuition is due on Monday, with a \$40.00 late fee assessed on payments made after 5:30PM on Tuesday. If tuition is not received by Friday your child may not attend Connection Kids the following week, and will be withdrawn from the program.



- Late Pickup Fee: **children must be picked up promptly by 5:30PM.** A late pickup fee will be assessed at the rate of \$10 per every five minutes per child, that a child remains past 5:30PM.
- Holiday/Illness Tuition Policy: Reduction in tuition will not be made for absences due to illness or holiday. Full tuition will be billed each week throughout the school year. CK closings are posted on our board outside the office.
- Vacation Policy: Full time students will be allotted one week vacation during the school year.
- Immunization Records & Current Physical: I understand I need to supply an original copy of each of these records if my child is not registered in the Public School system.

Please Initial the appropriate line below:

- Wait List Fee \$50 one time fee, if enrolled can be applied to Registration fee.
- Registration Fee \$100 annual fee \$50 Summer
- Infant Classroom \$215 per week
- Toddler 1 Classroom \$185 per week
- Toddler 2 Classroom \$165 per week
- Pre-K Classroom (3&4) \$155 per week
- VPK Only No charge
- VPK Extended Care \$115 per week
- After School Only \$70 per week
- Before & After School \$80 per week
- Summer Camp Registration Fee \$50 \$130 per week
- Holiday Care \$35 per day

Parent/Guardian Signature

Date

STATE OF FLORIDA DEPARTMENT OF HEALTH
WRITTEN NOTARIZED MEDICAL CONSENT OF A MINOR CHILD

Student's Full Name: _____

You the parent/guardian will complete a daily health check at home and are consenting when you bring your student to Connection Kids and.or signing him/her in or out, that your child has no symptoms of illness and has not received fever reducing medicine.

I consent to (please check the boxes)	Medical Treatment
<input type="checkbox"/>	Check their temperature (via forehead or ear).
<input type="checkbox"/>	Ice for minor bruises and cuts.
<input type="checkbox"/>	Wash a minor cut or wound with warm water.



<input type="checkbox"/>	Apply a bandage to an open cut or wound.
<input type="checkbox"/>	Give an epinephrine injection (EPIPEN) if needed due to the student's allergic reaction.
<input type="checkbox"/>	Check the student's hair if there is an lice outbreak with the school.

I AUTHORIZE CONNECTION KIDS SCHOOL STAFF TO SECURE THE MEDICAL TREATMENT THAT IS LISTED ABOVE. I AUTHORIZE THE ADULT TEACHER/STAFF TO ACT ON MY BEHALF AND TO AUTHORIZE ANY OF THE MEDICAL TREATMENT LISTED ABOVE.

Parent/Guardian Name (Please Print): _____

Parent/Guardian Signature (Please Sign): _____

Sworn to and subscribed before me this ____ day of _____ 20__

By _____, who is personally known to me or who produced a valid _____ - as identification and who did not take an oath.

Notary Signature

Notary Seal

STATE OF FLORIDA DEPARTMENT OF HEALTH

WRITTEN NOTARIZED **EMERGENCY MEDICAL CONSENT** OF A MINOR CHILD

Student's Full Name: _____

Please list any medical information or history that we need to be aware of: _____

Serious Allergies: _____

Physician's Name: _____ Phone: _____

Parent/Guardian Responsible for insurance: _____

Insurance Company Name: _____

Policy Number: _____ Phone Number: _____

I AUTHORIZE CONNECTION KIDS SCHOOL STAFF TO SECURE EMERGENCY MEDICAL TREATMENT BY ANY PHYSICIAN, HOSPITAL OR OTHER MEDICAL ATTENDANT FOR THE ABOVE NAMED STUDENT IN THE EVENT OF A MEDICAL EMERGENCY. I AUTHORIZE THE ADULT TEACHER/STAFF TO ACT ON MY BEHALF AND TO AUTHORIZE AND APPROVE ANY OF THE MEDICAL TREATMENT OR HOSPITALIZATION WHICH IS RECOMMENDED BY A PHYSICIAN.

Parent/Guardian Name (Please Print): _____

Parent/Guardian Signature (Please Sign): _____



Sworn to and subscribed before me this ____ day of _____ 20__

By _____, who is personally known to me or who produced a valid _____ - as identification and who did not take an oath.

Notary Signature

Notary Seal

CONNECTION KIDS ELC SCHOOL READINESS EXCESSIVE ABSENCES FORM

(ALL PARENTS PLEASE FILL OUT IN CASE YOU JOIN THE ELC SCHOOL READINESS PROGRAM)

Dear ELC School Readiness Parents:

Students Name: _____

If your child is absent more than 3 days during a month without a doctor's excuse you will be charged a \$30.00 per day and per child enrolled in an excessive absence fee. ELC does not reimburse our school after 3 days of unexcused absences. Your attention to this matter and compliance is greatly appreciated. Doctor's notes turned into the front office no later than the last day of each month.

Thank you,

Cheri A. Dunbar
Owner/Director

I have read and understand the ELC excessive absence fee(s)

Parent/Guardian Signature

Date

Printed Name of Child



CONNECTION KIDS BITING POLICY (Effective 9-28-18)

Biting is unfortunately not unexpected behavior for toddlers. Some children and many toddlers communicate through this behavior. However, biting can be harmful to other children and to staff. This biting policy has been developed with these ideas in mind. As a child care provider we understand that biting, unfortunately, is a part of a day care setting. Our goal is to help identify what is causing the biting and resolve these issues. If the issue cannot be resolved, this policy serves to protect the children that are bitten. If a biting incident occurs, state regulations require that the parent of the child biting and the parent of the child who was bitten be contacted. Names of the children are not shared with either parent.

When Biting Does Occur: Our staff strongly disapproves of biting. The staff's job is to keep each child safe. They also help children who bite learn different and more appropriate behaviors. We do not use techniques to alarm, hurt or frighten children such as biting back or washing a child's mouth out with soap.

For the child that was bitten:

1. First aid is given to the bite. It is cleaned with soap and water. If the skin is broken, the bite is covered with a bandage.
2. Parents are notified.
3. The "Incident/Accident Form" is filled out documenting the incident.

For the child that bit:

1. The teacher will firmly tell the child "NO! DO NOT BITE!"
2. The child will be placed in time out for no longer than the child's age (one year old, one minute).
3. The parents are notified.
4. The "Incident/Accident Form" is filled out documenting the incident.

When Biting Continues:

1. The child will be shadowed to help prevent any biting incidents.
2. The child will be observed by the classroom staff to determine what is causing the child to bite (teething, communication, frustration, etc.) The administrative staff may also observe the child if the classroom staff is unable to determine the cause.
3. The child will be given positive attention and approval for positive behavior.

When biting becomes excessive:

1. If a child inflicts 3 bites in a one week period (5 weekdays) in which the skin of another child or staff member is broken, bruised or the bite leaves a significant mark, the child will be suspended for 2 business days.
2. If a child repeats behavior again and inflicts 3 bites in a one week period (5 weekdays) in which the skin of another child or staff member is broken, bruised or the bite leaves a significant mark, the parents will be asked to make other day care arrangements.

Connection Kids will do their best every day to prevent it as much as possible. We need your help at home by reminding your child if he/she bites that teeth are for chewing their food and that biting hurts.



By signing this document, I affirm that I have read and understand the terms outlined above and I agree to abide by those terms.

Parent/Guardian Signature

Date

Printed Name of Child

Risk and Waiver of Liability Relating to the CoronaVirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Connection Kids at 213 S PALM AVE TITUSVILLE FL have put into place preventative measures to reduce the spread of COVID-19; however, the childcare **can not guarantee** that you Or your child(ren) will not become infected with COVID-19. Further, **attending childcare could increase** your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending Connection Kids that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 , at Connection Kids may result from actions, omissions, or negligence of myself and others, including but not limited to, Connection Kids employees, volunteers, and program participants and their families.

On my behalf, and on behalf of my child(ren), I hereby release, covenant not to sue, discharge, and hold harmless Connection Kids, its employees agents, and representatives, of and from the Claims, including all, liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of Connection Kids, its employees, agents, and representative, whether a COVID-19 infection occurs before, during, or after participating in any childcare program.

Student's Full Name: _____

Parent/Guardian Name (Please Print): _____

Parent/Guardian Signature (Please Sign): _____

Sworn to and subscribed before me this ____ day of _____ 20__

By _____, who is personally known to me or who produced a valid _____ - as identification and who did not take an oath.

Notary Signature

Notary Seal

Connection Kids Classroom Parental Responsibilities



Need help paying your tuition payment?

Good news Connection Kids is part of the Early Learning Coalition School Readiness Provider Program!

If you qualify for The School Readiness Program ELC will help you by paying a portion of your weekly tuition.

To contact the Early Learning Coalition of Brevard follow the steps below:

1. ONLINE

Go to elcbrevard.org : Look on the left hand side for "School Readiness".

2. BY PHONE

You can call 321-637-1800 (ext. 8573) and a CCR&R specialist can help you over the phone.

DISTRACTED DRIVER FROM: PLEASE SIGN AND RETURN



FACTS ABOUT HEATSTROKE:

It only takes a car **10 minutes to heat up 20** degrees and become deadly.

Even with a **window cracked**, the temperature inside a vehicle can cause heatstroke.

The body temperature of a child increases **3 to 5 times faster** than an adult's body.



⚠️ PREVENTION TIPS:

- Never leave your child alone in a car and call 911 if you see any child locked in a car!
- Make a habit of checking the front and back seat of the car before you walk away.
- Be especially mindful during hectic or busy times, schedule or route changes, and periods of emotional stress or chaos.
- Create reminders by putting something in the back seat that you will need at work, school or home such as a briefcase, purse, cell phone or your left shoe.
- Keep a stuffed animal in the baby's car seat and place it on the front seat as a reminder when the baby is in the back seat.
- Set a calendar reminder on your electronic device to make sure you dropped your child off at child care.
- Make it a routine to always notify your child's child care provider in advance if your child is going to be late or absent; ask them to contact you if your child hasn't arrived as scheduled.

During the 2018 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes to provide parents, during the months of April and September each year, with information regarding the potential for distracted adults to fail to drop off a child at the facility/home and instead leave them in the adult's vehicle upon arrival at the adult's destination.



My signature below verifies receipt of the Distracted Adult brochure

Parent/Guardian:

Child's Name:

Date:

Please complete and return this portion of the brochure to your child care provider, to maintain the receipt in their records.

INFLUENZA FORM: FILL OUT AND RETURN

During the 2009 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes provide parents with information detailing the causes, symptoms, and transmission of the influenza virus (the flu) every year during August and September.

My signature below verifies receipt of the brochure on *Influenza Virus, The Flu, A Guide to Parents*:

Name: _____

Child's Name: _____

Date Received: _____

Signature: _____

Please complete and return this portion of the brochure to your child care provider, in order for them to maintain it in their records.



What should I do if my child gets sick?

Consult your doctor and make sure your child gets plenty of rest and drinks a lot of fluids. Never give aspirin or medicine that has aspirin in it to children or teenagers who may have the flu.

CALL OR TAKE YOUR CHILD TO A DOCTOR RIGHT AWAY IF YOUR CHILD:

- Has a high fever or fever that lasts a long time
- Has trouble breathing or breathes fast
- Has skin that looks blue
- Is not drinking enough
- Seems confused, will not wake up, does not want to be held, or has seizures (uncontrolled shaking)
- Gets better but then worse again
- Has other conditions (like heart or lung disease, diabetes) that get worse



How can I protect my child from the flu?

A flu vaccine is the best way to protect against the flu. Because the flu virus changes year to year, annual vaccination against the flu is recommended. The CDC recommends that all children from the ages of 6 months up to their 19th birthday receive a flu vaccine every fall or winter (children receiving a vaccine for the first time require two doses). You also can protect your child by receiving a flu vaccine yourself.

What can I do to prevent the spread of germs?

The main way that the flu spreads is in respiratory droplets from coughing and sneezing. This can happen when droplets from a cough or sneeze of an infected person are propelled through the air and infect someone nearby. Though much less frequent, the flu may also spread through indirect contact with contaminated hands and articles soiled with nose and throat secretions. To prevent the spread of germs:

- Wash hands often with soap and water.
- Cover mouth/nose during coughs and sneezes. If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.
- Limit contact with people who show signs of illness.
- Keep hands away from the face. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.



When should my child stay home from child care?

A person may be contagious and able to spread the virus from 1 day before showing symptoms to up to 5 days after getting sick. The time frame could be longer in children and in people who don't fight disease well (people with weakened immune systems). When sick, your child should stay at home to rest and to avoid giving the flu to other children and should not return to child care or other group setting until his or her temperature has been normal and has been sign and symptom free for a period of 24 hours.

For additional helpful information about the dangers of the flu and how to protect your child, visit: <http://www.cdc.gov/flu/> or <http://www.immunizeflorida.org/>



Parent's Role

A parent's role in quality child care is vital:

- Inquire about the qualifications and experience of child care staff, as well as staff turnover.
- Know the facility's policies and procedures.
- Communicate directly with caregivers.
- Visit and observe the facility.
- Participate in special activities, meetings, and conferences.
- Talk to your child about their daily experiences in child care.
- Arrange alternate care for their child when they are sick.
- Familiarize yourself with the child care standards used to license the child care facility.

More information and free resources:

MyFLFamilies.com/ChildCare



This child care facility is licensed according to the minimum licensure standards included in section 402.305, Florida Statutes (F.S.), and Chapter 65C-22, Florida Administrative Code (F.A.C.).

License Number: _____

License Issued on ___/___/___

License Expires on ___/___/___

For more information regarding the compliance history of this child care provider, please visit: MyFLFamilies.com/childcare



OFFICE OF CHILD CARE REGULATION AND BACKGROUND SCREENING
MYFLFAMILIES.COM

To report suspected or actual cases of child abuse or neglect, please call the Florida Abuse Hotline at 1-800-962-2873.

CF/PI 175-24, 03/2014
This brochure was created by the Florida Department of Children and Families, Office of Child Care Regulation and Background Screening pursuant to s. 402.3125(5), F.S.,



Know Your Child Care Facility

MyFLFamilies.com/ChildCare

General Requirements

Every licensed child care facility must meet the minimum state child care licensing standards pursuant to s. 402.305, F.S., and ch. 65C-22, F.A.C., which include, but are not limited to, the following:

- Valid license posted for parents to see.
- All staff appropriately screened.
- Maintain appropriate transportation vehicles (if transportation is provided).
- Provide parents with written disciplinary practices used by the facility.
- Provide access to the facility during normal hours of operation.
- Maintain minimum staff-to-child ratios:

Age of Child	Child:Teacher Ratio
Infant	4:1
1 year old	6:1
2 year old	11:1
3 year old	15:1
4 year old	20:1
5 year old and up	25:1

Health Related Requirements

- Emergency procedures that include:
 - Posting Florida Abuse Hotline number along with other emergency numbers.
 - Staff trained in first aid and Infant/Child CPR on the premises at all times.
 - Fully stocked first aid kit.
 - A working fire extinguisher and documented monthly fire drills with children and staff.
- Medication and hazardous materials are inaccessible and out of children's reach.

Training Requirements

- 40-hour introductory child care training.
- 10-hour in-service training annually.
- 0.5 continuing education unit of approved training or 5 clock hours of training in early literacy and language development.
- Director Credential for all facility directors.

Food and Nutrition

- Post a meal and snack menu that provides daily nutritional needs of the children (if meals are provided).

Record Keeping

- Maintain accurate records that include:
 - Children's health exam/immunization record.
 - Medication records.
 - Enrollment information.
 - Personnel records.
 - Daily attendance.
 - Accidents and incidents.
 - Parental permission for field trips and administration of medications.

Physical Environment

- Maintain sufficient usable indoor floor space for playing, working, and napping.
- Provide space that is clean and free of litter and other hazards.
- Maintain sufficient lighting and inside temperatures.
- Equip with age and developmentally appropriate toys.
- Provide appropriate bathroom facilities and other furnishings.
- Provide isolation area for children who become ill.
- Practice proper hand washing, toileting, and diapering activities.

Quality Child Care

Quality child care offers healthy, social, and educational experiences under qualified supervision in a safe, nurturing, and stimulating environment. Children in these settings participate in daily, age-appropriate activities that help develop essential skills, build independence and instill self-respect. When evaluating the quality of a child care setting, the following indicators should be considered:

Quality Activities

- Are children initiated and teacher facilitated.
- Include social interchanges with all children.
- Are expressive including play, painting, drawing, story telling, music, dancing, and other varied activities.
- Include exercise and coordination development.
- Include free play and organized activities.
- Include opportunities for all children to read, be creative, explore, and problem-solve.

Quality Caregivers

- Are friendly and eager to care for children.
- Accept family cultural and ethnic differences.
- Are warm, understanding, encouraging, and responsive to each child's individual needs.
- Use a pleasant tone of voice and frequently hold, cuddle, and talk to the children.
- Help children manage their behavior in a positive, constructive, and non-threatening manner.
- Allow children to play alone or in small groups.
- Are attentive to and interact with the children.
- Provide stimulating, interesting, and educational activities.
- Demonstrate knowledge of social and emotional needs and developmental tasks for all children.
- Communicate with parents.

Quality Environments

- Are clean, safe, inviting, comfortable, child-friendly.
- Provide easy access to age-appropriate toys.
- Display children's activities and creations.
- Provide a safe and secure environment that fosters the growing independence of all children.



IMPORTANT DATES: OUR SCHOOL WIDE CLOSURE DATES FROM JULY 1, 2023 TO JUNE 30, 2024 Updated 7/6/23

HOLIDAYS	DATE OBSERVED
INDEPENDENCE DAY	Monday July 4, 2023
LABOR DAY	Monday September 4, 2023
VETERAN'S DAY	Friday November 10, 2023
THANKSGIVING	Wednesday-Friday November 22-24, 2023
CHRISTMAS BREAK	Monday-Friday December 25-29, 2023



GOOD FRIDAY	Friday March 29, 2024
MEMORIAL DAY	Monday May 27, 2024

Connection Kids VPK Closure Dates We will offer full time care on these dates

Dates	Pricing (Per Child)
Monday September 4, 2023	Connection Kids is closed
Friday November 10, 2023	Connection Kids is closed
Thanksgiving Break; November 23- 25. 2023	Connection Kids is closed Nov 23-25' \$35 plus your regular tuition rate
Winter Break: December 25-29, 2023	Connection Kids is closed
Monday January 16, 2023	\$30 plus your regular tuition rate
Monday February 20, 2023	\$30 plus your regular tuition rate
Spring Break: March 13-17, 2023	\$120 for all dates
Friday April 7, 2023	Connection Kids is closed

Brevard Public School Closure Dates These dates are tentative, if dates are added we will let you know if we can cover those dates

Dates	Pricing (Per Child)
Monday October 10, 2022	\$30 plus your regular tuition rate
Monday November, 21 & Tuesday November 22, 2022	\$30 per day plus your regular tuition rate
Winter Camp: December 22 & 23, 2022 & January 2- 4, 2023	\$120 for all dates
Monday January 16, 2023	\$30 plus your regular tuition rate
Monday February 20, 2023	\$30 plus your regular tuition rate
Spring Break: Monday-Friday March 13 - 17, 2023	\$120 for all dates
Monday March 20, 2023	\$30 plus your regular tuition rate
Monday April 24, 2023	\$30 plus your regular tuition rate.