

The Village Christian Preschool and Childcare Center

Parent's Handbook



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The Village Christian Preschool and Childcare Center Parent Hand Book

*Note: "Center" or "The Center" in the following document refers to
The Village Christian Preschool & Childcare Center.*

Mission Statement

The Village Christian Preschool & Childcare Center is a ministry of the Incline Village Community Presbyterian Church, also known as The Village Church. Our Mission is to set the foundation for a life long relationship with Jesus Christ and provide a developmentally appropriate environment where young children can develop to his/her individual potential through varied learning materials in an atmosphere of Christian love.

Philosophy

The purpose of The Village Christian Preschool & Childcare Center is to provide a Christ centered developmentally appropriate learning environment for any young child.

We Believe:

- Each child is a unique and special creation of God, worthy of unconditional love and respect.
- Every child has the right to grow and learn to his God given potential. Providing a safe, nurturing and positive atmosphere will help to ensure growth into healthy, successful adults.
- Social skills, learning to get along with each other and learning appropriate problem solving skills are among the most important lessons a child can learn to be successful and happy in life.

PROGRAM

Early Childhood Education is recognized as a profession and a vocation. Good early childhood practices are based on knowledge of child development theory and research. Staff, as early childhood professionals, will stay informed of new findings and implement them in the programs and positive discipline techniques for the children.

The Village Christian Preschool & Childcare Center is a year round full day care Center. This Center is licensed for children ages 1yrs – 5yrs. Our program is play based with enriching activities to encourage the development of each child. Activities include music, creative expression, arts and crafts, dramatic play, math, language, music and movement, science, stories, manipulatives, sensory activities, cooking, and outdoor play. Social skills and problem solving are taught throughout the day. Spiritual development and Christian values are included in the curriculum, activities and daily interactions. Children learn through their play and by participating in hands on activities in both large and small groups, children will be encouraged to participate in all aspects of the program in order to grow and achieve their age appropriate goals.

Spiritual Development of Children

We feel that the development of your child is of the utmost importance. This involves nurturing in the home, in the school and in the community. Therefore, it is the policy of The Village Christian Preschool & Childcare Center to encourage families to be active participants in the programs at the Center. The regular programs at The Village Christian Preschool & Childcare Center will implement Christian values in several ways, including:

- Weekly Christian value lessons
- A prayer or blessing said before all meal and snack times

Twice a month we will gather in the sanctuary for music and short lessons reflecting Christian values.

Discipline Policy

We set only those limits necessary to protect and support your child and the group. We are consistent but flexible. All staff members enforce rules. It is a teacher's responsibility to enhance a child's behavior through positive guidance, redirection of behavior and the setting of clear-cut limits on behavior. Jesus set good examples for us to follow. Children will respond to you when they feel loved and respected. Staff shall NOT for any reason: (1) Inflict physical punishment, in any manner or form, upon any child; (2) Verbally abuse or threaten a child; (3) Make derogatory remarks about the child or his/her family in front of other parents or children; (4) Threaten a child with the loss of love of any person; (5) Threaten a child with punishment by a deity; (6) Subject a child to any form of punishment which pertains to food or rest or restricts the use of toilet or other bathroom fixtures; (7) Subject a child to any form of punishment by other children.

Disciplinary measures must be consistent with supportive, positive action, and may include:

(1) Holding a child's arm to prevent hitting; (2) Bodily picking up the child and removing him from the group, at which point you may sit with the child until he/she is ready to play without hitting or you may isolate child with supervision for no more than 10 minutes; (3) Informing the child in a simple, positive manner what conduct is expected while he/she is in the facility; (4) Praising and recognizing a child who behaves in the expected manner; (5) Directing a child who is in a situation that is creating problems to a new activity; (6) Teach, model and role play appropriate behavior.

Biting

When children are in a "crises" they are in need of unconditional love and discipline. The word discipline comes from the word disciple. A disciple is one who is taught appropriate behavior, not punished. God disciplines us daily and Jesus took the punishment for our inappropriate behavior. That said, our philosophy on challenging behavior that arises in children in any crises is to teach appropriate behavior. We will do everything within our training and resources to help teach children to learn how to communicate, interact, react (or not) in a way that glorifies God. We use Galatians 5:22-23 to encourage the fruit of the spirit which is love, joy, peace, patience, gentleness, kindness, goodness, and self control. With a young biter just 2 and under we use the words "no bite, that hurts, nice touches" and remove the child from the particular area or activity. As the child gets older, a teacher is assigned to shadow the child. That means the teacher stays close and hopefully sees the problem coming and stops it and teaches/models appropriate behavior. When the bite is not stopped, the consequences are: the child who got bit gets the first attention and the most attention and the biter is initially ignored. After the bitee is settled, and we try to help the bitee not become too dramatic, then the biter sits in time-out. The biter then has to go and help care for the bitten child and give them nice touches. The biter also has a teether which he either carries or the shadowing teacher carries and each time the teacher walks by him, she puts it in his mouth and says "bite, bite, bite" and reminds him that the "bitey toy" or "food" is for biting, not our friends. The idea behind the "bitey toy" is to get the child tired of biting and if it is a situation of sore gums, to give him appropriate pain relief. We also don't want the other kids realizing that biting is getting some good attention (albeit negative). This means that sometimes the shadowing teacher leaves her post to push a kid on the swings, help out somewhere, etc... which is sometimes the very moment the biter decides to lash out for whatever reason. We do not ignore unacceptable behavior. Our job here is to teach children good social skills. We believe that we could teach children to read and write by the time they are 3 but if a child does not know Jesus or how to problem solve and get along they will have a hard time being successful in life.

DAYS AND TIMES OF OPERATION

The center will operate year round, Monday through Friday, from 7:45 a.m. until 6:00 p.m. A late pick-up fee of \$15.00 will be charged for any part of each 15 minutes after 1:00 p.m. for ½ day kids or 6:00 p.m. per child picked up after closing time.

Enrollment opportunities are:

Monday through Friday, Full Day – 7:45 a.m. to 6:00 p.m.

- Children may be enrolled for no less than two full or two half days per week. The child is welcome to use any part of their enrolled time the parent would like one day a week on a trial basis.
- Please keep in mind our program and schedule. It is difficult for kids to arrive at lunch or naptime. It is also disruptive to kids involved in naptime, class time or group time when kids arrive in the middle of such activities. Please arrive at least 30 min. before lunch or nap and 15min before a group or class time. See page 6 for daily flexible schedule.

The Village Christian Preschool & Childcare Center will be closed for the following Major holidays

Labor Day and the Friday before Labor Day	New Year's Day
Nevada Day	President's Day
Veterans Day	Memorial Day
Thanksgiving and the Friday after Thanksgiving	Independence Day
The Week between Christmas and New Year's	

After six (6) months of attendance each child in the Center is eligible for one more week of vacation credit. Vacation credit is calculated from September to August each year, and may not be used in advance or carried over from year to year. Vacation credit may be used for one continuous week for illness, absence or scheduled vacation. Please fill out a Written Vacation Credit form to turn into the office for billing purposes.

ENROLLMENT

Enrollment in The Village Christian Preschool and Childcare Center is made without regard to race, color, gender, disability, or creed (it being understood that the education in the Center is based on Christian Values).

Enrollment Schedule

- We will provide additional care for children at times other than their regularly scheduled days if space is available. This care must be requested in advance and paid for on the day the care is given.
- If you are enrolled in our half day program your child may not be picked up later than 1:00 p.m. for the morning program. If in the morning program, your child is picked up after 1:30 p.m. a late fee of \$15 will be charged for any part of 15 minutes & \$1.00 each minute after that. The school closes at 6:00 p.m. A late fee will be charged if your child is picked up after 6:00 p.m. \$15.00 for any part of the first 15 minutes plus \$1.00 per minute for any minutes after 6:15 p.m.
- Every effort is made to ensure an appropriate and comfortable placement for children in our program. The Village Christian Preschool & Childcare Center intends to provide a safe, peaceful, Christian environment for all children. There may be times when parents choose to withdraw their child from the program, or when The Village Christian Preschool & Childcare

Center determines it is in the best interest of all concerned to dismiss a child/family from the program.

We reserve the right to dismiss a child/family from The Village Christian Preschool & Childcare Center if the child or family is disruptive to the program, or if the family fails to adhere to the policies of the Center, i.e. paying tuition on time. If a child is withdrawn from the Center, a two-week notice is required. If notice is not given, fees will be assessed for this time. If the Center dismisses a child/family from the program, no notice is required.

RECORDS

The following records are required for enrollment:

- Current immunization record before first attendance day
- Registration forms, emergency contact information & signed policies (Forms 1a, b, & c)
- Well child form filled out and signed and dated by a physician, required by Nevada. (Form 3)
- Health History (Form 4)
- Release and Emergency Information (Forms 5, 6 & 7)

If your address, phone number, or emergency information changes, please contact the school office as soon as possible to correct our records.

STAFFING

All staff members are carefully screened and selected, and meet or exceed the requirements set by the State of Nevada. An applicant must be 16 years of age. In addition, the Nevada State Law (NAC 432a.520) states that a licensee of a child care facility shall have a staff which is sufficient in number to provide care and individual attention to each child and allow time for interaction between the staff and the children to promote the children's social competence, emotional well-being and intellectual development.

These requirements include:

- Annual CPR and First Aid Certification
- 24 hours of Early Childhood classes, annually
- TB tests
- FBI Background Clearance
- Infectious Disease Workshop
- Recognizing Child Abuse and Neglect

Staff will also exemplify Christian values and be encouraged to grow in their walk with Christ.

MANDATED STATE REPORTING LAWS

Nevada State Law (NRS 432B and NAC 432A-410) requires professionals in the medical, education, child care, law enforcement, religious, legal and social services fields to report any suspected child abuse or neglect to Child Protective Services, local law enforcement and to the Bureau of Child Care Services. The Village Christian Preschool & Childcare Center fully complies with this requirement.

THINGS YOU NEED TO KNOW

- **Sign In** – Be sure to sign your child/children in and out.
FOR THE SAFETY OF THE CHILDREN, all children must be picked up and dropped off each day, in person, by a parent or other authorized **ADULT**. Children may not walk themselves into the Center. Sign-in sheets will be posted. Parents are asked to

sign children in and out each day by recording their initials and time of arrival and departure. These records are required by the State of Nevada and give The Center a record should there ever be a question about attendance or who picked up a child. These records also insure an accurate count for fire drills or in the event of a fire or other emergency.

- The people listed on the registration form may only pick up your child. If it becomes necessary for someone not listed on the registration form to pick up your child, **WRITTEN PERMISSION SIGNED BY THE PARENT(S) WILL BE THE ONLY WAY YOUR CHILD WILL BE RELEASED FROM THE CENTER. NO EXCEPTIONS WILL BE MADE.**
- In the event of an emergency, The Village Christian Preschool and Childcare Center is **not financially responsible for any emergency vehicle transportation costs or for any medical care or cost incurred as a result of the Center initiating the care.**
- In the event of an emergency, procedure and plan for evacuation and meeting places are as follows:
 - 1) If there is a problem with in the church/school grounds, we will walk to St. Francis Catholic Church.
 - 2) If the church/school neighborhood or our community is evacuated by law enforcement we have to go where they send us. This information is available through the media or the law enforcement ordering our evacuation. We will have your emergency information with us and will make every effort to get all the information directly to you to meet up with your child.
- In the event of a serious accident or illness, the staff will take prompt action on behalf of the child first, and then notify the parents as quickly as possible. Parents are required to submit a **Child Health and Emergency Information Card** at time of enrollment and to update this information regularly.

PRESCHOOL DAILY FLEXIBLE SCHEDULE

7:45 a.m. School opens

7:45 – 9:00 Children arrive; Morning free play

8:30 – 9:45 Self-serve Snack is offered

9:00 – 9:45 Theme-related activity (Bible, math, creative expression, language, science)

9:30 – 9:45 Clean-up

9:45 – 11:30 Group and Class time (Developmentally appropriate curriculum skill activity, Spanish, sign language, calendar, weather)

11:15 – 12:30 Outside playtime; potty training

12:30 – 1:00 Worship time (Bible story and songs, memory verse and theme activity)

1:00 – 1:30 Lunch time

1:30 – 1:45 Lunch clean up, wash hands, go potty, get nap gear

1:00 – morning only kids picked up

1:45 - 2:00 Nap story/prayer time

2:00 - 3:00 Nap time quiet cot activity

3:00 - 4:00 Kids not sleeping can get up. Creative self-directed activity is set up or outside time; Potty training as kids wake up

4:00 – 4:15 Group time
4:15 – 4:45 Snack
4:45 – 5:30 Outside/free play with an activity
5:30 – 6:00 Get ready to go home

6:00 –School Closes. A charge of \$15.00 from 6:01pm – 6:15pm for late pick up per child will be due to the teacher in charge, plus \$1.00 per minute for any minutes after 6:15 p.m.

- **Clothing:** It is important to be prepared! Accidents of all kinds can happen. Please provide a set of extra clothes. When they are used they will be placed in a bag in your child's cubby, please replace the next school day. The weather in Tahoe changes quickly: be sure to have a sweater or sweatshirt for those days it cools off. On snowy days we will go outside and your child needs full snow gear daily. We do fun, messy projects. We have smocks and will encourage your child to use them but they will not miss out on an experience, so please dress your children in clothes that can get messy (maybe even stained). All belongings must be marked with child's name.
- **Sick Children:** Please keep your children home when he/she has:
 - A communicable disease i.e. chicken pox, pink eye, etc
 - Vomiting or diarrhea in the last 24 hours
 - Had a fever of 100.4 or higher in the last 24hours. May return when fever-free and medication-free for 24hours
 - Yellowish green nasal discharge
 - Has a serious cold and/or constant cough
 - Cannot participate in all activities, including going outside
 - Is generally not themselves i.e.: cranky, listless, tired, etc.
 - Been on prescribed antibiotics less then 24 hours

Your child will be sent home when he/she has:

- A fever of 100.4 or higher- your child will be separated from the rest of the children please have plans in place to pick-up as soon as possible
- Vomiting or diarrhea. We are not doctors and cannot determine if these symptoms are contagious or not
- Yellowish green nasal discharge
- Symptoms of a communicable disease
- Constant cough

The school staff may administer only prescription medication. It must be in original container with child's name, dosage, doctor's name and instructions for dispensing on container. You must fill out a prescription request form and give both form and medication to a teacher. Children may not bring medication to school in lunch pails, backpacks, etc.

- **Food:** Mid-morning and mid-afternoon snacks are provided. It is the responsibility of parents to send lunch.
- **Lunch:** Your child needs to bring a packed lunch. One that **does not** need to be refrigerated. Please pack foods low in sugar and high in nutrition. Lunches that contain only nutritional food afford the child more independence – they can eat what ever they want in the order they want and the teacher doesn't have to stand over them making them save their dessert for last.
- **Nap Time:** We will provide a quiet lying down time for the children. They may bring a blanket, small pillow and small soft toy to sleep with. Blanket, pillow and toy must be washed weekly!

- Show and Tell: will be the first day of the month your child attends. Your child may bring a small item that will fit in their cubby. Please **do not** allow your child to bring a toy on any other day.
- NoNo's: Please no money, gum, candy, jewelry, make-up, perfume or weapons of any sort.
- Birthdays: On your child's birthday you may send a special birthday treat. The healthier the better! Check with a teacher regarding how much.
- Parties: We will schedule several parties during the year. They will be held during activity time. The kids will usually prepare the goodies and games will be played. You are welcome to join us. If the party falls on a day your child is not scheduled he may still attend the party with a parent.
- Parent involvement: We appreciate and welcome parents who can help. If you have time or talents to lend us, please let us know.

CHRISTIAN VALUES POLICY

The Village Christian Preschool & Childcare Center provides a safe, dependable program, while teaching Christian Values.

Among these values are the beliefs that:

- God is the Creator of all
- God loves and accepts all persons
- Jesus Christ, the Son of God, is the fullest revelation of God's love
- Jesus Christ teaches us that God loves and forgives us, as we in turn are to love, accept and forgive one another
- All that we have comes as a most magnificent gift from God
- All that we are is pure perfection from God
- Each person and especially each child has God-given gifts and abilities that can be used to show God's love.

It shall be the policy of The Village Christian Preschool and Childcare Center that no parent shall be forced to embrace Christian teachings as a condition for participation in the Center. In making Christian teaching a central part of the Center's program, the staff will be provided with training. The Center may:

- Make books visible and available in the Center. Children's Bibles and books on prayer may be included.
- Include Bible stories among the books available for children to read.
- Provide Bible games and puzzles.
- Include Bible songs, praise songs, hymns and carols in the regular activities of the Center.
- Invite the professional staff and Church members for occasional visits and participation in the regular and special programs of the Center.

PARENTS ARE WELCOMED AND ENCOURAGED TO VISIT THE CENTER, EXAMINE THE MATERIALS AND DISCUSS THE ACTIVITIES.

PARENTS AGREE TO ABIDE BY ALL POLICIES AND PROCEDURES

PAYMENTS AND FEES

Tuition will be billed on the 21st of the month for the total monthly tuition (month in advance) with adjustments of prior month. Tuition is **due in full the first of each month**. A late fee of 5% will be charged to your account if payment is received after the 7th of the month, unless you have made prior payment arrangements. Your child or children will be excluded from the program if payment or an agreement for payment is not made by the 7th or next business day if the 7th falls on a weekend or holiday. We are willing to work with families regarding a payment schedule for reasons related to financial hardship. However, families must communicate with the Preschool if a payment schedule is necessary.

A **late pick-up fee** of \$15.00 will be charged for any part of each 15 minutes after 1:00pm for ½ day kids or after 6:00pm for afternoon and full time children, per child.

Extra Days: Rate for already enrolled children is the daily rate of **\$44.00** for a full day and **\$34.00** for an additional morning.

Discounts Available:

3% discount if tuition is paid for the whole year at once. (51 weeks)

5% discount to all Village Church members with their children enrolled in the center.

TWOs and OLDER

2015 FEES PER MONTH	
(Based on a 51-Week Year)	
Full Day Hours: Monday- Friday	
7:45 AM - 6:00 PM	
Half Day Hours: A.M. - 9:00-1:00	
5 Days Per Week -	\$816.00
1/2 Day AM -	\$589.00
4 Days Per Week -	\$684.00
1/2 Day AM -	\$492.00
3 Days Per Week -	\$513.00
1/2 Day AM -	\$369.00
2 Days Per Week -	\$342.00
1/2 Day AM -	\$246.00
1 Day Per Week -	\$171.00
1/2 Day AM -	\$123.00
Drop-In-Fees:	
Enrolled:	\$44.00 Full Day
	\$34.00 AM Only
	(9:00AM - 1:00PM)
Not enrolled:	\$51.00 for any part
	of a day

Rates effective 1/01/15

Registration Form 1 - Page 1

Child's Name _____ Birth date _____
Child's Nickname _____ Home Phone _____
2nd Child's Name _____ Birth date _____
2nd Child's Nickname _____ Home Phone _____
Address -Mailing _____
Physical _____
City _____ State _____ Zip code _____

Mother's Name _____ E-Mail Address _____
Employer _____ Business Phone _____
Business Address _____

Father's Name _____ E-Mail Address _____
Employer _____ Business Phone _____
Business Address _____

Please list the names and ages of other family members residing in the home:

Name _____ Age _____ Relationship _____
Name _____ Age _____ Relationship _____
Name _____ Age _____ Relationship _____

Emergency Information:

Physician's Name _____
Physician's Address _____
Physician's Phone _____

In the event we are unable to reach the undersigned parent(s) in an emergency, please list three other persons to contact:

1)Name _____ Relationship _____
Address _____
Home Phone _____ Cell Phone _____

2) Name _____ Relationship _____
Address _____
Home Phone _____ Cell Phone _____

3) Name _____ Relationship _____
Address _____
Home Phone _____ Cell Phone _____

Registration Form 1 - Page 2

Please list persons who are authorized to pick up your child /children:

1. Name _____ Relationship _____
Address _____
Home Phone _____ Business Phone _____

2. Name _____ Relationship _____
Address _____
Home Phone _____ Business Phone _____

3. Name _____ Relationship _____
Address _____
Home Phone _____ Business Phone _____

4. Name _____ Relationship _____
Address _____
Home Phone _____ Business Phone _____

Is there anyone who MAY NOT pick up your child/children? If yes, please list

Registration Form 1 - Page 3

Parent(s) Authorizations

Initials

If parent(s) or above authorized persons are unreachable in an emergency, I authorize The Village Christian Preschool and Childcare Center to take my child to the doctor listed above or the emergency room at a local hospital. I agree to pay for any services rendered or any necessary treatment resulting from emergency medical care.

I hereby grant permission for my child/children to use all play equipment and participate in all activities of The Village Christian Preschool and Childcare Center.

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

The Village Christian Preschool and Childcare Center will not be responsible for anything that may happen as a result of false information given at the time of enrollment.

*I (we) agree to enroll my (our) child(ren) _____
in The Village Christian Preschool and Childcare Center.*

I have read, understand and agree to adhere to the policies for Tuition Payments and Late Fees.

I (we) received and read The Village Christian Preschool and Childcare Center Policies and Procedures and understand the rules, regulations and policies stated therein. I (we) agree to adhere to all policies set forth by The Village Christian Preschool and Childcare Center.

I am registering my child(ren) for the following program:

Care to begin at: _____ AM/PM and end at _____ AM/PM

on the following days: _____

Signature of parent or legal guardian

Date

Signature of parent or legal guardian

Date

THIS FORM NEEDS TO BE FILLED OUT, SIGNED AND DATED BY YOUR CHILD'S PHYSICIAN AND RETURNED OR FAXED TO 775-831-0798 AS SOON AS POSSIBLE.

Registration Form 2 (One form per child required)

This form is **REQUIRED** by the State of Nevada and **must be signed** by your family physician or a Registered Nurse (Washoe County Health Nurse is acceptable).

Child's Name _____ Birth Date _____

Please provide a report on the above named child(ren) using the form below. Daily activities include vigorous outdoor play, morning and afternoon snack, a noon meal and a nap after lunch.

I hereby authorize release of medical information contained in this form to the above named Center.

Signature _____ Date _____

Status of above child's health: _____

Any known conditions under treatment: _____

Any physical condition requiring special attention in the Center: _____

Any medication prescribed: _____

Is child capable of adjusting to programs of the Center?: _____

PLEASE ATTACH A COPY OF THE CHILD'S IMMUNIZATION RECORD WITH THIS STATEMENT.

Signature _____ Date _____

(If there is a 2nd child being registered, please make a copy of this form or request a 2nd copy)

Health History – Form 3

Child's Name _____ Birth date _____
Age _____ Sex _____

Please check if any of the following apply and explain fully below:

- | | |
|---|---|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Speech Problem |
| <input type="checkbox"/> Emotional/Behavioral Problem | <input type="checkbox"/> Hearing Difficulty |
| <input type="checkbox"/> Heart Problem | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Other |
| <input type="checkbox"/> Allergies | |

Explain _____

Allergies

Please list any allergies your child has to food, medicine, animals, etc.:

Does your child have any special needs or problems that might limit his/her participation in our program? If yes, please indicate how we can accommodate these needs.

Care instructions for child's health condition/problem (be very specific.)

Does your child have frequent (check all that apply)

- | | | |
|--|--|--------------------------------------|
| <input type="checkbox"/> Bloody nose | <input type="checkbox"/> Colds | <input type="checkbox"/> Earaches |
| <input type="checkbox"/> High Fever | <input type="checkbox"/> Low Grade Fever | <input type="checkbox"/> Sore Throat |
| <input type="checkbox"/> Stomach aches | <input type="checkbox"/> Tantrums | <input type="checkbox"/> Tonsillitis |

Explain _____

Does your child take medication on a regular basis? _____

Explain _____

Health History – Form 3 (For Second Child)

2nd Child's Name _____ Birth date _____
Age _____ Sex _____

Please check if any of the following apply and explain fully below:

- | | |
|---|---|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Speech Problem |
| <input type="checkbox"/> Emotional/Behavioral Problem | <input type="checkbox"/> Hearing Difficulty |
| <input type="checkbox"/> Heart Problem | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Other |
| <input type="checkbox"/> Allergies | |

Explain _____

Allergies

Please list any allergies your child has to food, medicine, animals, etc.:

Does your child have any special needs or problems that might limit his/her participation in our program? If yes, please indicate how we can accommodate these needs.

Care instructions for child's health condition/problem (be very specific)

Does your child have frequent (check all that apply)

- | | | |
|--|--|--------------------------------------|
| <input type="checkbox"/> Bloody nose | <input type="checkbox"/> Colds | <input type="checkbox"/> Earaches |
| <input type="checkbox"/> High Fever | <input type="checkbox"/> Low Grade Fever | <input type="checkbox"/> Sore Throat |
| <input type="checkbox"/> Stomach aches | <input type="checkbox"/> Tantrums | <input type="checkbox"/> Tonsillitis |

Explain _____

Does your child take medication on a regular basis? _____

Explain _____

Permission to Release Information – Form 4

_____, understand that during the time my child(ren),
PRINT Parent or Guardian name

Child(ren) Names

is in the care of The Village Christian Preschool and Childcare Center, the Director may be asked for information regarding my child(ren). I hereby give permission to release information to only official persons who adequately identify themselves, such as a health care personnel, welfare, or other government agency.

Signature _____ Date _____
Parent or Legal Guardian

**I do not give permission to release information about my child as set forth in the
aforementioned statement.**

Signature _____ Date _____

Emergency Procedure/Release of Liability Affidavit – Form 5

I, _____ true parent or legal guardian of _____
Print name of parent or legal guardian 1st Child's name

I, _____ true parent or legal guardian of _____
Print name of parent or legal guardian 2nd Child's name

do hereby grant permission to the staff of The Village Christian Preschool and Childcare Center to administer first aid and emergency treatment in the event of an accident or emergency. It is understood that said parent or guardian shall be reached as soon as possible in case of accident or emergency.

Physician's Name _____
Physician's Address _____
Physician's Phone _____
Preferred Hospital _____
Medical Insurance Coverage _____

In the event that neither physician nor parent or legal guardian can be reached, The Village Christian Preschool and Childcare Center may contact any Nevada State licensed practicing physician. I agree to pay for any costs and medical bills incurred. I understand that The Village Christian Preschool and Childcare Center is not responsible for any medical care and/or emergency transportation supplied to my child in the case of an emergency.

It is understood that The Village Christian Preschool and Childcare Center, the staff of the Center, The Village Presbyterian Church, pastor, staff and board are released from liability for any accidents or emergencies.

Signature _____ Date _____

D.O.B _____

Emergency Information Card – Form 6

Child's Name _____ **Check if child has any allergies** _____

Physical Address _____

Mother's Name _____

Home Phone _____ **Work Phone** _____ **Cell Phone** _____

Father's Name _____

Home Phone _____ **Work Phone** _____ **Cell Phone** _____

_____ **Phone** _____

1st choice person (if not parent) to call in emergency

_____ **Phone** _____

2nd choice person (if not parent) to call in emergency

Date of last tetanus shot _____

Has your child ever had a seizure? Yes _____ No _____

If so, under what condition(s) did the seizure occur? _____

Please note any other health problems such as unusual tendency to bleeding, fainting, etc.

Child's Physician _____ **Phone** _____

Preferred Hospital _____ **Phone** _____

Medical Insurance Coverage _____ **Phone** _____

I, _____, give my consent for _____

Print Parent or Guardian's Name

Print 1st Child's Name

to be treated for medical or surgical emergencies by any licensed physician or hospital in the event that I cannot be located.

Signature _____ **Date** _____

D.O.B _____

Emergency Information Card – Form 6 (Second Child)

2nd Child's Name _____ **Check if child has any allergies** _____

Physical Address _____

Mother's Name _____

Home Phone _____ **Work Phone** _____ **Cell Phone** _____

Father's Name _____

Home Phone _____ **Work Phone** _____ **Cell Phone** _____

_____ **Phone** _____

1st choice person (if not parent) to call in emergency

_____ **Phone** _____

2nd choice person (if not parent) to call in emergency

Date of last tetanus shot _____

Has your child ever had a seizure? Yes _____ No _____

If so, under what condition(s) did the seizure occur? _____

Please note any other health problems such as unusual tendency to bleeding, fainting, etc.

Child's Physician _____ **Phone** _____

Preferred Hospital _____ **Phone** _____

Medical Insurance Coverage _____ **Phone** _____

I, _____, give my consent for _____

Print Parent or Guardian's Name

Print 2nd Child's Name

to be treated for medical or surgical emergencies by any licensed physician or hospital in the event that I cannot be located.

Signature _____ **Date** _____

Signature _____ **Date** _____

Signature of Parent or Legal Guardian