OPEN DOORS PRESCHOOL
PARENT HANDBOOK

3732 Lee Blvd.
Lehigh Acres, FL 33971
(239) 303-1944
open_doors_preschool@earthlink.net
WELCOME TO OUR LEARNING ENVIRONMENT!

We are using the Christian principles of the WEE Learn Curriculum for all age groups guided by the Creative Curriculum Approach for Early Childhood and the Creative Curriculum for Infants and Toddlers. Our school holds two highly prestigious Gold Seal Quality of Care Accreditations from NAC (National Accreditation Commission for Early Care and Education Programs) and NACECPPP (National Accreditation Council For Early Childhood Professional Personnel and Programs).

Throughout the year we will be writing to you to share information about our program and to give you some suggestions of things to do at home that will help your child learn and grow.

When you visit your child’s classroom, you will see that it is arranged by interest areas. There are areas for blocks, table toys, and books, an area for dramatic play, and sensory areas with sand, water, or other items, a space for outdoor play, and a space for computers in the older children’s classrooms. The classroom is set up this way for two important reasons:

First, it helps the children decide where they want to play and which material they want to select;

Second, it provides smaller, well-defined spaces that appeal to young children and helps them feel secure. In this type of learning environment, children can move at their own pace, learn to make age-appropriate choices, and experience success as they use a wide variety of learning materials.

The shelves in our classrooms are all at the children’s eye level. The children can independently select the materials they need and return them at the end of each play period.

The labels on the shelves and on the storage bins help children learn where each toy belongs. This makes clean up easier and more fun.

Located outside each classroom is a weekly lesson plan. Our goal is to recognize the individuality of each child so we can offer experiences most appropriate to enhancing the particular blend of heredity and environment unique to each child.

Your child will benefit most from our program when we all work together. We are always available to talk with you, and we welcome your ideas, questions, and involvement in our program.
Dear Parents:

Welcome to Open Doors Preschool. We are excited about being able to offer you our program Please take a moment to read our brochure and look through our center. Listed below are some areas that may not have been covered in our other brochures or in your tour.

1. First Day: First day is an exciting time for parents, children and staff. We want you to be prepared for that day also. For infants, your child will need bottles, formula, wipes, baby food and at least three changes of clothing. For toddlers and preschoolers; your child will need at least three changes of clothing, too and a blanket. All children may bring a special item from home to make them feel more comfortable if needed. Please make sure you label everything with your child’s name.

2. Grouping: In the early morning, or late afternoon, your child may or may not be in his regular classroom. Grouping is done when there are not enough children to have a full classroom. Groups that may be combined will include infants and toddlers, twos and threes, threes and fours, and fours and fives. Once additional children arrive, we will separate the classrooms into their proper groups. We ask for your understanding and patience during this phase of our day.

3. Teacher Qualifications and Turnover: We take pride in selecting appropriate teachers for our center. All of our teachers are encouraged to achieve their highest goals and to look for ways to enhance their education. We offer special benefit packages and a chance for growth with the company to reduce turnover. All staff members undergo all required state and federal background checks. In addition to the required training in early childhood growth, education, and curriculum, many of our teachers have degrees, or are working on their degrees in ECE.

4 Illnesses: Illnesses can be common in-group care. The health and safety of each child is our primary focus. Being clean and safe are the only ways we can help prevent illnesses. We need your cooperation by abiding by the rules of our illness policy. Please keep your child home when needed. This only protects your child and the well being of the other children.

5. Open Door Policy: Our center is always open to your visits, along with the door to the Director’s office; I welcome your comments about our program.

Thank you again for choosing Open Doors Preschool for your child or children. I encourage all of you to be an active partner in our center by becoming involved with your child’s activities here at Open Doors Preschool.

Sincerely,

Rachel McIntyre
Director
OPEN DOORS PRESCHOOL
Policies

The following policies insure that Open Doors Preschool will have a good relationship with you and your child:

ABSENTEEISM:
Student tuition will be charged for all absences less than one week. We are sorry, but we cannot pro-rate for absences less than one week. All absences over one week (for sickness, vacation or any other reason) will be charged on a 40% tuition basis or a readmission fee, whichever is less (provided space is available).

ADMISSIONS:
Children are accepted from the age of six weeks up until Kindergarten in the full day program and children up to 12 years old in the afterschool, holiday and summer programs. Open Doors Preschool does not discriminate on the basis of ethnicity, economic level, family structure, language, religion, sex, national origin or disability.

Names are placed on the waiting list by date of application. If a space becomes available for a child on the waiting list before he/she is ready to come to the center, the space can be held only if tuition is paid in full.

Any change in enrollment status (i.e. from 5-day to part time) must be approved in advance by an administrator. Modifications to enrollment status will be made on a space-available basis. The following information will be completed prior to enrollment and will be updated as required by NSI regulations and/or requested by Open Doors Preschool administration or staff:

• Enrollment Form
• Student Information
• Physical Form signed by physician (gold)
• Copy of Child’s Birth Certificate
• Emergency Information/Release Form
• Allergy Information (by physician only)
• Food Program Application
• Child Participation Form
• Immunization Record (blue)
• Parent Agreement

COMPLAINT PROCEDURE:
The director is available upon request to talk to you about any concerns or complaints that you may have regarding the center and/or its policies and procedures. If the director is unable to address a parent’s concern in a satisfactory manner, the center can refer the parent to Nicene Schools International, which licenses, inspects and oversees the program.
**CURRICULUM:**
Each classroom plans its daily routines and activities based on developmentally appropriate practices for young children. The learning experiences provided by the teachers enhance development in the children on all levels: socially, emotionally, cognitively, physically, and creatively. The curriculum includes daily plans that allow freedom of choice, interactions with adults and children, active and quiet activities, individual and small group activities, family-style meals, hands-on exploration of real materials, outdoor/active play, and creative problem solving. Lesson plans, daily schedule, menus and special events are posted in each classroom.

Open Doors Preschool uses the Creative Curriculum in conjunction with Mother Goose Time and the A Beka curriculum for reading readiness and literacy. For more specific information on how the Creative Curriculum meets mandated Florida Readiness Standards, please request the appropriate Creative Curriculum alignment pattern for your child’s specific age group. The alignment pattern is available in PDF format and can be e-mailed to you directly.

**CURRICULUM FEES:**
The curriculum and materials fee is $15.00 monthly per child. This fee is non-refundable and cannot be prorated. We use the Creative Curriculum, and the Mother Goose Time Curriculum both year-round curriculums as well the A Beka Curriculum for literacy.

**DISCIPLINE:**
The goal of Open Doors Preschool’s child guidance policy is to build self-worth, increase social competence, and enhance the dignity of each child. All guidance and discipline techniques used at the center shall be in accordance with this positive emphasis. The purpose of any set of procedures should be to teach children to learn how to control themselves in various situations.

**Positive approaches to guidance include:**
• Staff will have a well-designed, developmentally appropriate learning environment and provide developmentally appropriate learning experiences.

• Staff will know and be sensitive to the developmental, cultural, and individual needs of each child.

• When inappropriate behavior occurs, the teacher shall examine the situation thoroughly to determine the cause; i.e., something in the classroom, stress at home, a physical problem with the child, or some other factor. The teacher shall be responsible for documenting patterns of inappropriate behavior and bringing such patterns to the attention of parents and administrators.

The goal of developmentally appropriate guidance is to help children learn to make socially acceptable choices. For that reason teachers strive to use mediation and guidance to assist children in making acceptable choices. Our goal is to give children the tools they need to become good friends and good citizens.
Open Doors Preschool follows procedures as outlined below in encouraging self-discipline:

**Infants and Toddlers:**
When working with infants and toddlers, teachers will use such strategies as: prevention, distraction, encouraging, modeling, and enticing the child to a new activity. Infants and toddlers should never be put in time out because it is developmentally inappropriate.

**Three, Four, Five Year Olds, and Schoolagers:**
Similar techniques will be used with preschoolers and schoolagers such as: prevention, redirecting, humor, reminding, encouraging, modeling, discussion, problem-solving, and conferencing.
Calm down time may be used as a behavior management technique to assist in solving an ongoing or habitual behavioral problem for this age group. Calm down time will be no longer than one minute per year of the child’s age. Calm down time will be followed by redirection and positive encouragement.

*Open Doors Preschool does not permit ANY FORM of corporal punishment.*

**These discipline techniques are NOT permitted:**

- Corporal Punishment or physical force is NEVER allowed!
- A child is NEVER to be deprived of food, water, a nap or rest, a comfort item from home, or bathroom facilities!
- Unsupervised isolation of a child is NEVER allowed! “Time Out” shall rarely be used. Instead, teachers will use a calm down time to help children compose themselves before returning to play. Further, it is recommended that more appropriate methods of redirecting and/or guiding children, as described in *Developmentally Appropriate Practices* (Bredekamp & Copple; 1997), be used with four, five, and six year olds.
- Adults are expected to always show respect for children by NEVER addressing a child harshly with intimidation or ridicule. Also, center personnel will not discuss a child’s behavior with other adults, in the presence of other children, or with other parents. Written or verbal reports to parents regarding conflicts will guard confidentiality by not revealing the name of any other child involved.

Staff members will encourage parents to use these same approaches to guide and discipline their children.
All parents and staff are required to sign Open Doors Preschool’s *Child Guidance & Discipline Procedures Agreement*. A copy of this Agreement is included in this Handbook.

**DISMISSAL:**
We reserve the right to dismiss any child at any time. Some incidents leading to dismissal are exemplified as, but are not limited to the following: disrupts the class, undesirable language, physical abuse of self, teacher, or other children).
DROP OFF PROCEDURE:
A parent or another adult must accompany every child to the classroom and notify the teacher of their presence. Please recognize that for safety reasons children may not walk to their classrooms alone. Open Doors Preschool is not responsible for the child until the parent has signed the child in and a teacher recognizes the child as being present.

EMERGENCY PLAN:
In the event of an emergency situation that requires an evacuation of Open Doors Preschool, one of the following plans shall be implemented. In all situations, the caregiver in charge when evacuating shall:

- Take an accurate attendee list;
- Account for all children and staff as they board/depart vehicles;
- Bring any necessary medications/supplies and emergency records;
- Take a cellular phone if available to be used for emergency notification of parents. If possible, the phone company will be contacted and asked to forward all calls to our main number (239-303-1944) through to the available cell phone.

For all types of emergencies where the children cannot stay on the premises, the children will be brought to Lehigh Regional Medical Center (1500 Lee Blvd.), by bus or automobile where they will remain accompanied by caregivers while family/guardian/emergency contacts are notified of the situation and arrangements are made for either the transporting home or care taking for the remainder of the day.

In the event of a major environmental hazard occurring during operation of the facility that necessitates a larger area evacuation such as several neighborhoods, a city/town or geographical area, due to a large non-confined hazard, e.g. earthquake, hurricane, etc., children will be transported to: a Red Cross designated mass shelter by bus where they will remain accompanied by caregiver(s) while family/guardian/emergency contacts are notified and arrangements are made for their pick up. Staff will remain with and care for the children at all times during an event. Attendance will be checked whenever children are moved. Staff will bring any necessary medications, supplies, and emergency records.

Medical Emergency:
Staff involved in the direct care of children maintain current certification in First Aid and CPR for infants and children.

The teacher will apply appropriate first aid measures for all medical emergencies and minor illnesses or injuries as outlined in approved First Aid training. The parent/guardian of a sick or injured child will be contacted by telephone as soon as possible. The center Director or a staff member will continue to try to reach a parent/guardian or emergency contact. However, whether or not he or she is able to contact a parent/guardian, the child will still be taken to the hospital whenever a medical emergency exists.
HEALTH RECORDS:
It is mandatory for each child to have on file in the school office an updated shot record (blue form 680), a Florida physician’s statement (yellow form 3040), and a copy of the child’s birth certificate. Please take care of this matter before admission. These records are checked periodically by county, state, and accrediting agency inspectors. It will be necessary to dismiss a child who does not have the above records on file.

HOLIDAYS:
Holidays during the year have been taken into consideration at the time prices were established. Therefore, no deduction can be taken for holiday absences. There will be no adjustments made in case of a hurricane or other national circumstances not controllable by us. We will follow the same operating procedures as the public school system under those circumstances.

Open Doors Preschool is closed for the following holidays: New Year’s Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Christmas Day. We close early (3 P.M.) on New Year’s Eve and Christmas Eve.

ILLNESS:
We have to consider all the children in our school, and we wish to make sure that they are all protected from illness. Therefore, if your child becomes sick at school, we will inform you immediately. Please make sure that the phone numbers we have on file are current. We do want to notify you as soon as possible if your child is not feeling well.

To help prevent illness from spreading, children will be excluded from the classroom if any of the following symptoms or conditions occur:
1. Fever of 100 degrees or above
2. Nausea, vomiting, or abdominal pain,
3. Diarrhea,
4. Unusual drowsiness or tiredness,
5. Sore throat, colored mucus, acute cold, or persistent cough (non allergic),
6. Red, inflamed, or discharging eyes,
7. Swollen glands around jaws, ears, or neck,
8. Impetigo, until 24 hours after an acceptable antibiotic treatment has been started and documented,
9. Any skin sore oozing fluid, yellow pus in blisters, or pus which has an odor,
10. Other undiagnosed skin condition

If your child begins to exhibit these symptoms during the school day, he or she will be excluded from the classroom and brought to our rest area for ill children in the front office. You will be promptly notified and required to make arrangements for pick up immediately. When you pick up, you will be given a Medical FYI documenting the symptoms your child exhibited. You may also receive a Medical Referral if your child requires a pediatrician’s authorization before returning to care.

We will notify parents, in a written notice, of any contagious diseases. If your child requires medication to be administered by prescription, it is your responsibility to make arrangement for
the administration thereof. Open Doors Preschool **DOES NOT** administer medication of any kind (prescription or non-prescription), this includes any topical ointment such as diaper cream. Please do not ask our staff to administer medication as it is in direct violation of this policy.

**Basic Rule of Thumb:** *If your child is not well enough to play outdoors, the child is not well enough to come to school. Please DO NOT bring your child to school if he/she has suffered from any of the symptoms listed above within the last 24 hours.*

**INFANTS/TODDLERS:**
Only infants six weeks or older may be accepted (some restrictions apply). Parents must provide supplies necessary for the day (diapers, powder, wipes, bottles, formula, food, etc.), and give the attendant any instructions on care for the child.

**LATE FEES:**
Tuition is due every Monday, but can be paid as late as Tuesday morning without a late fee. A late fee of $5.00 will be charged if tuition is paid Tuesday afternoon. If paid on Wednesday or thereafter, a $15.00 fee will be added to your account.

Closing time is 6 P.M.. A late pick up fee will be charged after that time. This fee will be added to your account.

**LUNCHES/SNACKS:**
Lunches, drinks, and snacks are provided by the school for all students through the Florida Child Care Food Program. It is necessary that each child have a completed Meal Application and Participation Form on file with Open Doors Preschool. These forms are updated annually each September. A weekly menu will be available for review each week. If your child has a food allergy, please be sure that we have a doctor’s note on file so that we may avoid serving your child that particular food. Additionally, **please note that any food that is brought into Open Doors Preschool (i.e. for birthday and holiday parties) must be commercially prepared or prepared in a kitchen that is inspected by local health officials.**

**MATERIAL FEES:**
There will be a $15.00 per month fee for the curriculum and materials that your child uses on a daily basis such as paper, pencils, glue, art and craft projects, etc. This fee is due with the last tuition payment each month.

**MEDICATION ADMINISTRATION:**
**We are sorry, but Open Doors Preschool cannot administer medication of any kind.** This includes topical ointments such as diaper cream and sunscreen. Please make arrangements for medication administration during out of school hours. Medication may **never** be brought from home in formula, milk, or juice in a cup or bottle.

**PARENT CONFERENCES:**
Parent conferences are held in the spring and again in the fall to track your child’s progress and overall development. Parent conferences will include information from teacher
observations and written assessments. Your perspective as a parent concerning your child’s growth and development is heartily invited so that your child’s teacher may consider and integrate your perspective in classroom planning.

PART-TIME ENROLLMENT:
Part time enrollment has limited availability. It is available for ages 2 years and up only, we do not offer part time for children under the age of 2. The amount of days per week signed up for upon enrollment must be paid for whether absenteeism occurs or not. For instance, you sign up for 3 days per week, you must pay for 3 days even if your child was here only 1 day. Also initial start-up fees are the same as for full-time students.

PERSONAL BELONGINGS:
We cannot be responsible for any personal belongings brought in by your child. However, we will do our best to protect them. Please label everything belonging to your child. This will assist us in returning lost items.

PHILOSOPHY & GOALS:
We believe that each child is a precious gift from God with unique and special qualities. Our major emphasis at Open Doors Preschool is to help children discover their God-given qualities while sharing His love and forgiveness with them. We believe that children learn best in an interactive, “hands-on” environment where they can discover the world around them at their own level of development. Since children need to feel secure before they will begin to explore their environment, we will give them love and respect, and help them to learn how to interact with adults and peers. The activities we provide will give them many opportunities to develop their cognitive, social, emotional, physical and spiritual growth.

We feel that play is the most important aspect of young children’s lives… it is essential to their well-being and development. New concepts, new skills and new understanding come to children through play. In play, children learn to formulate and organize ideas and to become more flexible in problem solving. Children’s attention spans begin to lengthen when they play. Their imaginations can take them anywhere they want to go. Their senses can help them to see God’s creation in fascinating new ways. During play, children learn to communicate their thoughts, feelings and needs to others. Children’s "work" is play … that is how they prepare for the future.

We believe the family is the child’s first and best teacher. Our program involves the whole family including parent meetings, parent conferences, and parent participation in the classroom.

Goals For Children
- Develop a healthy self-concept.
- Develop positive trusting relationships with teachers and peers.
- Develop security and a feeling of success.
- Develop socially, emotionally, intellectually, and physically through interactions with adults, children, and materials.
- Develop independence and personal care skills.
- Develop enjoyment of creative experiences.
Goals For Parents

- Become familiar with the Open Doors Preschool philosophy, goals, policies, and procedures.
- Seek information on age-appropriate expectations and methods to enhance each child’s optimal learning and development of self concept.
- Explore methods for child guidance and for the progressive development of self control in children.
- Become active in family-school partnerships to promote quality environments for children.

RE-ENROLLMENT:
To reenroll your child after a long absence due to illness, vacation or transfer, you will be charged $40.00 (some restrictions apply). This is to your benefit as you will not be charged for all the weeks of absence.

REFUND INFORMATION:
Refunds may be made after receipt of a written notice of withdrawal. This notice must be received in our office at least two weeks before the withdrawal date. At that time, any weekly tuition fees paid beyond the submitted withdrawal date will be processed and refunded by check. Refunds usually take four weeks to process and mail. Please do not ask for a refund if you have not appropriately observed our withdrawal policy. We are sorry, but Open Doors Preschool cannot refund tuition for illness, dismissal, or partial attendance. Refunds are available for tuition only and do not apply to any other fees including curriculum or material fees.

REGISTRATION FEE:
There is a $40.00 registration fee to enroll your first child, and $20.00 for each additional child.

RELEASE OF CHILDREN:
A parent or another adult must accompany every child to the classroom and notify the teacher of their presence. Please recognize that for safety reasons children may not walk to their classrooms alone. Open Doors Preschool is not responsible for the child until the parent has signed the child in and a teacher recognizes the child as being present. Teachers must be informed when a child leaves his/her care. Children must be logged out on the computer system every day. It is mandatory that persons picking up a child must log in using a four digit personal identification number (PIN) in the office before a child may be dismissed. Do not attempt to pick up a child from the playground. Children will be released only to those persons whose names are listed on the enrollment form, and have a valid PIN. Photo identification will still be required of persons who do not routinely pick up children, although they have a PIN. Parents should advise the office in writing, if possible, if a person not listed on the enrollment form is to pick up the child, so that a PIN may be assigned.

If there is a court order prohibiting any individual from having access to a child, Open Doors Preschool must have a copy of the documentation ordering such prohibition.
Parents need to call Open Doors Preschool immediately should an emergency arise that keeps them from picking up their child on time. Parents will receive a late notice and will be charged a $15.00 late fee for every 5 minutes, even if they have called the staff to let them know of their late arrival. *This is a per child fee.* It is important to call, however, because it is comforting for children and staff to know a parent is on the way. If a child has not been picked up by 7:30 pm and no word or directions have been received from the parent or other authorized adult, a protective service worker or law enforcement officer will be notified to pick up the child. In such cases, the administrator on duty will stay with the child until he or she is united with his/her family.

Should you incur a late fee of more than $100.00 (picking up at 6:20 pm or later), it is required that payment of the late pick up fee be made in guaranteed funds (cash or money order only) before your student(s) may return to care. Please DO NOT pick up late.

**ROLE OF PARENTS:**
We believe the family is the child's first and best teacher. Our program involves the whole family including parent meetings, parent conferences, and parent participation in the classroom. The relationship that evolves between parents and teachers contributes tremendously to the sense of trust that is developing in each child. Parents and teachers have important complimentary roles and responsibilities in making a young child’s experience in-group care of the highest possible quality. Therefore, Open Doors Preschool will provide developmentally appropriate care and instruction for all students.

**SCHOOL HOURS:**
School hours are 6:30 AM to 6:00 PM Monday through Friday.

**SUMMER:**
Summer is spent in fun and play, taking a break from the usual school routine using special theme weeks, like Outer Space, Carnival, Western, etc. During the summer, school age children may be accepted (depending upon space availability) for a full day program.

**SUPPLIES:**
Parents will need to provide the following supplies for their children upon enrollment:

1. A rest mat of at least 1” thickness. It is the parent’s responsibility to care for this mat. If a mat is torn, it needs to be taped or replaced.
2. A change of clothing in a plastic bag labeled with the child’s name. Parents need to replace the clothing if it has been used or is no longer large enough for the child.
3. For infants, all supplies needed for the day—diapers, wipes, powder, food, etc. Formula is provided by the school.

**TEACHER TRAINING:**
Open Doors Preschool conducts background screening on every member of our staff as required by state law. This includes fingerprinting, background checks, and physical exams.
Our teachers also complete CPR and first aid courses as well as continuing to advance in their academic education.

**TUITION PAYMENT:**
The first week’s tuition must be paid in advance before admission. You may pay by cash, check, money order, or credit card (Visa or Master Card). The weekly tuition is due each Monday thereafter. A $25.00 late fee will be charged to all who do not make their full tuition payment by the following Tuesday morning. If a payment is not received by the next Monday morning, the child cannot attend school that day or thereafter until payment is made. If a payment is made for an amount less than the payment required, a $5.00 low payment fee will be charged. You will be charged the weekly fee even though your child was absent, because the space in that classroom must be reserved for his return. No deduction can be made for the few holiday absences when our school is closed–these are already calculated into our tuition rate. We will not accept post dated checks. All checks must have your name, address, phone number, and driver’s license number on it. We cannot accept blank checks for a new account. If your check bounces, we cannot redeposit it, there will be a $35.00 service fee automatically billed to your account. Returned checks may be replaced by CASH ONLY for reimbursement.

**TUITION IS NOT PRO-RATED** for any reason. Please do not ask us to pro-rate tuition, your request will be denied.

If a coupon or discount from advertising is used for tuition, it is limited to new full-time students and one per family. It must be used for consecutive weeks. The coupon discount may not be combined with any other advertising. If a parent is late making the tuition payment has a check returned, the coupon discount is rescinded and full payment will be required.

**WAITING LISTS:**
To put your name on our waiting list, simply pay the first week’s tuition in advance (non-refundable) and fill out an application form. You usually will not be required to wait long.

**WITHDRAWALS:**
A child may be withdrawn with a two week written notice to the office. If notice is not received in advance, charges for that time will be assessed. Please make sure your balance is fully paid. Please do not ask us to transfer academic or medical records if your bill is not fully paid.
OPEN DOORS PRESCHOOL
Fee Schedule
3732 Lee Blvd.
Lehigh Acres, FL 33971

TAX ID or FEIN # 43-2032960001

FULL TIME PROGRAM
Note: There is no part time care for children under two.
Infant $175.00 6 wks – 12 mos (No Discount for Infants)
Toddler: $155.00 12 mos – 18 mos.
Toddler: $145.00 18 mos. – 24 mos.
Toddler: $135.00 24 mos. Until toilet trained.
Preschool: $135.00 3-5 not toilet trained
Preschool: $125.00 2yrs. -5 yrs. toilet trained
Preschool: $115.00 3 day program
School Age: $70 before and after school

SCHOOLAGE RATES FOR PUBLIC SCHOOL CLOSINGS:
Full day attendance (w/ B&A care): Additional $10.00 per day fee.
Weekly school closings: $95.00.

ANNUAL ENROLLMENT/ REGISTRATION FEE: At initial registration, and annually thereafter.
NON REFUNDABLE
One Child $40.00
Additional Children $20.00 each

DROP-IN FEE
$35.00 per day on a space available basis. Not available for children 2 and under.

CURRICULUM & MATERIAL FEES:
Curriculum & Materials Fee: $15.00 per month.

LATE FEES:
Late Pick Up: Beginning at 6:00 PM, $15.00 for every 5 minute increment.
Late Payment: $25.00 per child, per tuition week.

RETURNED CHECK FEE: additional to Late Payment Fee.
$35 for each item. Also applies to declined credit/debit card charges on Tuition Express.
ENROLLMENT APPLICATION FORM

Child’s Full Name:________________________________________
Birthdate:___________Sex:______ Nickname(s):_______________

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*PIN’s are unique and the PIN requested may not be available. Open Doors Preschool will then assign you a PIN and notify you of the changed PIN.

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(This form is not complete without a parent signature on the reverse side.)
PARENT’S AGREEMENT

Welcome to Open Doors Preschool! Please familiarize yourself with our policies and the procedures outlined in our Parent Handbook and this Parental Agreement.

- Open Doors Preschool’s hours of operation are from 6:30 AM to 6:00 PM, Monday through Friday, excluding the holidays announced annually, and any closings due to inclement weather.
- Tuition payments are to be submitted promptly each Friday for the upcoming week. I agree to pay the amount due in advance, on a weekly basis, for the time my child is enrolled. Late fees of $15 per child will apply on Wednesdays if payment has not been received. Failure to submit payments for two weeks will result in termination of services. Families will pay any costs incurred in collection of past due amounts.
- Checks returned by the bank and declined credit cards on Tuition Express for any reason must be paid in cash, and a returned check fee of $35 will be automatically charged to the account.
- A two-week written notice is required for all withdrawals. If proper notice is not given, regular tuition will be due for this two-week time period.
- For children picked up after 6:30 PM, late fees will be added in the amount of $15 per child for the first five-minute period, and an additional $15 added for each five-minute period thereafter.
- Accurate information must be submitted at the time of enrollment. To ensure the well-being of all children in our care, any changes must be updated immediately, e.g. child’s health status, emergency contacts, physical statement, infant feeding plan, telephone numbers, etc.
- Each child’s immunization records and FL DOH forms must be presented upon his/her first day at the preschool. If the date passes for your child’s immunizations to be updated, you will have 14 days to update your child’s health records or your child may be excluded from attending Open Doors Preschool.
- Parents or authorized persons must always escort each child into and out of the classroom and are to check in and out by computer.
- I give Open Doors Preschool permission to photograph and use photographs of my children in the development of videos, published materials or news releases with the understanding that our privacy will be respected and honored. I also give teachers and student’s permission to photograph or video my child for the purposes of classroom assignments. Photographs may also be used for parent information on the Internet through www.opendoorspreschool.com.
- Open Doors Preschool does not dispense any medication to any child. Parents are asked to make other arrangements for medication administration.
- I have given my consent to have my child treated by a physician for medical or surgical care should an emergency arise. I understand that every effort will be made to contact me or a relative before such action is taken.
- I have received a copy of the NSI brochure “Know Your Child Care Facility” and have signed the Discipline Policy. The terms specified in this agreement are subject to change from time to time, in accordance with the regularly published terms and policies of Open Doors Preschool as outlined in the current Parent Handbook. Parents will be notified in writing of any changes. Your signature on this form is an acknowledgement that you have read and agree to comply with Open Doors Preschool policies, procedures, and terms, including the obligation to confer with the school first if I have any questions or problems and the disciplinary procedures as outlined in the Parent Handbook.

CHILD’S NAME ________________________ CURRENT CLASSROOM _______________

PARENT SIGNATURE ________________________ DATE ______________

DIRECTOR’S SIGNATURE ________________________ DATE ______________
EMERGENCY MEDICAL FORM

I, ____________________, hereby authorize Open Doors Preschool, in the event an emergency, to seek medical treatment for my child_________________.

Open Doors Preschool is also authorized to transport my child to the nearest medical facility used by the center, if I cannot be reached. I agree to assume responsibility for payment of any, and all emergency treatment and transportation. I agree to keep Open Doors Preschool informed at all times of any telephone numbers where a preferred physician or I may be reached.

The emergency procedure will be:

1. Contact parent(s).

<table>
<thead>
<tr>
<th>Name:</th>
<th>Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Phone:</td>
<td>Home Phone:</td>
</tr>
<tr>
<td>Cell Phone:</td>
<td>Cell Phone:</td>
</tr>
<tr>
<td>Work Phone:</td>
<td>Work Phone:</td>
</tr>
</tbody>
</table>

2. Contact person(s) listed as emergency contact(s).

<table>
<thead>
<tr>
<th>Name:</th>
<th>Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Phone:</td>
<td>Home Phone:</td>
</tr>
<tr>
<td>Cell Phone:</td>
<td>Cell Phone:</td>
</tr>
<tr>
<td>Work Phone:</td>
<td>Work Phone:</td>
</tr>
</tbody>
</table>

3. Call emergency medical team if necessary (911).

4. Transport child via emergency medical team to:

Hospital of Choice: ______________________________________________________, or

Nearest Hospital: _______________________________________________________.

5. Transport child to the approved medical provider or hospital:

Hospital: _____________________________________________________________
Address: ____________________________________________________________
Phone: _______________________________________________________________
Physician’s Name: ______________________________________________________

6. Insurance Company: _________________________________________________
Policy #: ____________________________  Group # __________________________
List any known medical conditions (example: diabetes, asthma, drug allergies etc.)
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

PARENT’S SIGNATURE: _________________________________
DATE: ____________

NOTARY: _________________________________ SEAL:
DATE: __________________________
STUDENT INFORMATION

LAST NAME: ____________________________  FIRST NAME: ____________________________

BIRTHDATE ____/____/____

SEX: M ( )  F ( )  SOC SEC #: ______ - ______ - ______  CLASS: ______________________________

ENROLL DATE: ______________________  START DATE: ______________________________

DOCTOR: ________________________________________  PHONE #: _____ - _____ - _____

DENTIST: ________________________________________  PHONE #: _____ - _____ - _____

SPECIALIST: ________________________________________  PHONE #: _____ - _____ - _____

FOOD ALLERGIES: ________________________________

_____________________________________________________________________________________________

SPECIAL DIET RESTRICTIONS (A doctor’s statement of medical need or a written parental statement of religious belief is needed.): ________________________________________________________________

OTHER ALLERGIES: ______________________________

_____________________________________________________________________________________________

IMMUNIZATION RECORDS IN PUBLIC SCHOOL? YES ( )  NO ( )

DATE OF LAST PHYSICAL: ________________________________

ANY SPECIAL NEEDS TO BE CONSIDERED IN CARING FOR YOUR CHILD? ____________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________
OPEN DOORS PRESCHOOL
Parent and Guardian Permission Form

The relationship that evolves between parents and teachers contributes tremendously to the sense of trust that is developing in each child. Parents and teachers have important complimentary roles and responsibilities in making a young child’s experience in-group care of the highest possible quality. Therefore, Open Doors Preschool will provide developmentally appropriate care and instruction for all students.

Please read the following conditions for participation in Open Door’s Preschool. If you feel that you are able to accept them, sign and return the form to Open Doors Preschool.

1. I agree to participate fully in parent-school activities, including scheduling parent/teacher conferences. I will do my best to keep teachers informed of changes at home and to work with suggestions made by the instructional staff.

2. I give Open Doors Preschool permission to photograph and use photographs of my children in the development of videos, published materials or news releases with the understanding that our privacy will be respected and honored. I also give teachers and student’s permission to photograph or video my child for the purposes of classroom assignments. Photographs may also be used for parent information on the Internet through www.opendoorspreschool.com.

3. I understand that if my child is totally unable to function in a group setting, he/she may be asked to undergo diagnostic assessment and may be referred to another agency for assistance. If these resources are not able to provide the necessary assistance, alternative sources for care will be suggested.

4. I understand that Open Doors Preschool will strive to provide high quality care for my child. I know that I am encouraged to observe and participate in my child’s classroom at any time and am expected to communicate daily with the staff.

Child’s name: _____________________________________________________________

Parent/Guardian Signature: ______________________ Date: ___________________

Management Signature: ___________________________________________________
ALL ABOUT MY BABY

Child’s Name: ______________________________________________ Date: __________________

Please share some feeding information for your child’s caregiver.

Does this child take a bottle? Yes ( ) No ( )
Should the bottle be warmed? Yes ( ) No ( )

Does the child hold his/her own bottle? Yes ( ) No ( )
Does the child feed his/herself? Yes ( ) No ( )

Does the child eat? Strained foods ( ) Formula ( ) Baby foods ( ) Whole milk ( ) Table foods ( ) other ( )

Type of formula: ____________________ Amount of formula: ________________________________

Update amounts of formula to be given: ________________________________________________

Food likes: ___________________________ Food dislikes: ________________________________

Allergies (which include premixed formula) _____________________________________________

Note any types of commercial premixed formula which, due to allergies, may NOT be used in an emergency:

__________________________________________________________________________________

Instructions for introducing solid foods:

__________________________________________________________________________________

Any updated instructions for adding new foods or other dietary changes. List as needed:

__________________________________________________________________________________

How do you offer comfort to your child?

Does the child take a pacifier? YES ( ) NO ( ) When? ________________________________

How do you get your baby to go to sleep?

Does the child need a special blanket, stuffed animal, etc. to sleep? YES ( ) NO ( )

Describe/Name: _________________________________________________________________

What is a typical day like for your baby?

CHILD’S SCHEDULE Approx Time Type & Amount of Food

Breakfast ___________________ ______________________________

Lunch ___________________ ______________________________

Dinner ___________________ ______________________________

Morning Nap ___________________ ______________________________

Afternoon Nap ___________________ ______________________________

How can we partner with you to meet the cultural needs of your family? _____________________________

__________________________________________________________________________________

What do you wish for your child’s experience to be like at our center? _____________________________

Thanks for sharing your precious little one with us. We look forward to a great partnership for a nurturing, rich educational experience.

Parent Signature: ___________________________________________ Date: __________________

NOTE: INFANT INFORMATION SHEET SHOULD BE UPDATED BI-MONTHLY BY PARENT.
Date ____________________

I, _________________________, give permission to Open Doors
Preschool for my child, _______________________________________,
to be allowed to sleep on their stomach.

____________________________________
Parents Signature

____________________________________
Physician Signature

According to new Florida Administrative Code Regulation 65C-22.002 Physical Environment, Section 5.(g) When napping or sleeping, young infants that are not capable of rolling over on their own should be positioned on their back and on a firm surface to reduce the risk of Sudden Infant Death Syndrome (SIDS) unless an alternate position is authorized in writing by a physician. The documentation shall be maintained in the child’s record. We need a signed permission form you and your physician.
ALL ABOUT MY CHILD

Please complete the following information and return it to your child’s teachers. This will help us to get to know your child a little better. Thank you!

Child’s Name________________________________Name called: _______________________

Birth Date__________________

Parents’ Names: (mother) ____________________ (father) ________________________

Siblings (please list names & ages) ___________________________________________

Who lives with your child? ___________________________________________________

Does your child have any pets? (Describe them) ___________________________________

What was your child’s previous preschool experience (if any) like? ___________________

__________________________________

Child’s normal schedule at home: Breakfast _____________ Lunch _________________

Dinner _______________ Nap ______________

Anticipated Daily Times of: Arrival _____________ Departure_____________________

Part time: M_________ T_________ W__________ Th.__________ F ___________

What are your child’s favorite? Colors: _______________________________________

Interests: __________________________________________ Least favorite activities: ______

Activities: ________________________________________ Least Favorite Foods: _______

Foods: ____________________________________________

Feeding habits or traditions at home? (How does your family eat dinner?)___________

Feeding abilities (good with spoon, uses fingers, etc.): ___________________________

Allergies (be specific)_________________________________________________________

Describe your child’s toileting (diapers, needs some help, goes alone, etc.): ______

What comforts your child? ____________________________________________________

Special toy or blanket for sleeping (describe and name)___________________________

Fears (if any): _______________________________________________________________
What time does your child typically wake-up on a school day? ____________________
Do you have to wake him/her up? _____________________________________________
What is your child’s typical bedtime on a school night? __________________________
Bed Time Routine (do you read or sing before bed, etc.) __________________________
Does your child’s schedule change on the weekends? ____________________________

Describe any cultural or religious beliefs that your child’s teachers should know include languages (other than English) spoken in the home: ____________________________

Personal/Special Preferences (if any): __________________________________________

Describe any big or dramatic events that have recently occurred in your child’s life:
__________________________________________________________________________
__________________________________________________________________________

Please list anything else you would like your child’s teacher to know:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

What do you expect your child to gain from the experience this year at our Center?
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

About the parents:
Occupations: (mother) ________________________ (father) _______________________
Email address: (mother) ________________________ (father) _______________________
Hobbies/Talents: _____________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Would you like to come in and share anything with your child’s class? ______________
(If yes, please describe the way in which you can help or share your interests :)
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Additional Comments: _________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

*Please feel free to attach any additional sheets if you need more room to comment.*
Thanks for sharing your precious little one with us. We look forward to a great partnership for a nurturing rich educational experience.
**PARENT/GUARDIAN INFORMATION**

**MOTHER’S INFORMATION**

<table>
<thead>
<tr>
<th>LAST NAME:</th>
<th>FIRST NAME:</th>
</tr>
</thead>
</table>

GUARDIAN YES ( ) NO ( )

<table>
<thead>
<tr>
<th>ADDRESS:</th>
<th>CITY:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>STATE:</th>
<th>ZIP:</th>
<th>HOME PHONE:</th>
</tr>
</thead>
</table>

DR LICENSE #  
SOCIAL SECURITY # ________ - ____ - ________

EMPLOYER:  
PHONE #:  

<table>
<thead>
<tr>
<th>ADDRESS:</th>
<th>CITY:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>STATE:</th>
<th>ZIP:</th>
<th>POSITION:</th>
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</thead>
</table>

**FATHER’S INFORMATION**

<table>
<thead>
<tr>
<th>LAST NAME:</th>
<th>FIRST NAME:</th>
</tr>
</thead>
</table>

GUARDIAN YES ( ) NO ( )

<table>
<thead>
<tr>
<th>ADDRESS:</th>
<th>CITY:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>STATE:</th>
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</tr>
</thead>
</table>

DR LICENSE #  
SOCIAL SECURITY # ________ - ____ - ________

EMPLOYER:  
PHONE #:  

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<table>
<thead>
<tr>
<th>STATE:</th>
<th>ZIP:</th>
<th>POSITION:</th>
</tr>
</thead>
</table>

Identify person with whom child lives: ______________________________________________________

Address of this person if different from parent(s): ____________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Notes: ____________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________
The purpose of guidance and discipline is to teach a child to have self-discipline. The emphasis of any set of procedures should be to teach the child to learn how to control themselves in various situations.

**Open Doors Preschool does not permit ANY FORM of corporal punishment.**

Open Doors Preschool follows procedures as outlined below in encouraging self-discipline:

**Infants and Toddlers**
When dealing with infants and toddlers, teachers will use such strategies as: prevention, distraction, encouraging, modeling, and enticing the child to a new activity. Infants and toddlers should never be put in time out because it is developmentally inappropriate.

**Three, Four, Five Year Olds, and School Ages**
Techniques such as prevention, redirecting, humor, reminding, encouraging, modeling, discussion, problem-solving, and conferencing will be used to address issues related to guidance and discipline.

Calm down time may be used as a behavior management technique to assist in solving an ongoing or habitual behavioral problem for this age group. It will only be one minute per year of the child’s age. Calm down time will be followed by redirection and positive encouragement.

**Open Doors Preschool does not permit corporal punishment of any type.**

* * *

I understand Open Doors Preschool’s Policy on Child Guidance and Discipline Procedures and agree to support and/or follow these procedures.

______________________________  ____________________
Parent/Teacher Signature          Date

**NOTE: This policy is the same for Parents and Teachers, and is used interchangeably.**
SCHOOL AGE TRANSPORTATION INFORMATION SHEET

My child: _______________________________ attends

Public/Private School Name: _______________________________________________________

And/or Open Doors Preschool on ___ Mon, ___ Tues, ___ Wed, ___ Thurs, ___Fri.

FOR TRANSPORTATION THROUGH THE LEE COUNTY BUS SYSTEM

My child’s bus #___________ is scheduled to arrive at Open Doors Preschool to pick up my child at _________ (Time).

My child is to be dropped off at Open Doors Preschool at ___________ (Time), on bus #___________.

I understand that it is my responsibility to notify Open Doors Preschool of any changes to my child’s attendance and/or bus schedule in advance and in writing.

TRANSPORTATION RULES:

1. Children using the Lee County School Transportation System cannot be picked up or dropped off outside of Open Doors Preschool hours.
2. The parent MUST call Open Doors Preschool each time there is any change to the transportation schedule. If a parent picks up a child at Private/Public School, Open Doors Preschool must be notified not to expect the child that afternoon.
3. The parent must notify the center two hours prior to the drop off time if the child will not be attending that day.
4. Parents are not permitted to pick up and/or drop off their children from the bus stop. All children must be checked out in the office. Failure to observe proper drop off and pick up procedures may result in dismissal.

Parent Signature: _________________________ Date: ______________________
# Child Care Food Program

**FREE AND REDUCED-PRICE MEAL APPLICATION**

To apply for free and reduced price meals for your child, read the instructions and complete this form. Sign your name, date and return the application to: Open Doors Preschool, 3732 Lee Blvd. Lehigh Acres, FL 33971. If you need assistance filling out this form, call this number: 303-1944.

### PART 1 - INFORMATION ON CHILD:

<table>
<thead>
<tr>
<th>Child's Name:</th>
<th>Name and Address of CCC/OSHCC:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Last Name | First Name | Date of Birth**

### PART 2 - HOUSEHOLDS RECEIVING FOOD STAMPS OR TANF BENEFITS:

Complete this part and Part 5.

<table>
<thead>
<tr>
<th>Food Stamp Case Number:</th>
<th>TANF Case Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### PART 3 - HOUSEHOLDS WITH A FOSTER CHILD:

Complete this Part and Part 5. If this is a foster child, check this box.

List the child's monthly personal use income $ or Write "0" if the child has no personal use income.

### PART 4 - ALL OTHER HOUSEHOLDS:

If you gave a food stamp or TANF case number then skip to Part 5. Otherwise, complete this part and Part 5.

### NAMES

<table>
<thead>
<tr>
<th>Names</th>
<th>INCOME AMOUNT / FREQUENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Example: $100 / month or $100 / twice a month or $100 / biweekly or $100 / week</td>
</tr>
</tbody>
</table>

**List the Names of Everyone in Your Household (include child listed in Part 1 above)**

1. Name: __________________________ Gross Earnings (Before Deductions)
2. Name: __________________________ Self-employed, list net income
3. Name: __________________________ Welfare, Child Support, Alimony
4. Name: __________________________ Pensions, Retirement, Social Security
5. Name: __________________________ All Other Income
6. Name: __________________________
7. Name: __________________________

### PART 5 - SIGNATURE AND SSN:

An adult household member must sign the application before it can be approved.

**Social Security Number**

Write NONE if you don’t have a Social Security Number

(Signature of Adult Household Member) Date Signed:

Home Phone No. Work Phone No.

**PART 6 (Optional) - RACIAL IDENTITY OF CHILD**

☐ American Indian or Alaskan Native  ☐ Asian  ☐ Black or African American  ☐ Hispanic or Latino

☐ Native Hawaiian or Other Pacific Islander  ☐ White  ☐ Not Hispanic or Latino

Privacy Act Statement: Section 9 of the National School Lunch Act requires that, unless you list your child’s food stamp or TANF case number or are applying for a foster child, you must include the social security number of the adult household member signing the application or indicate that the household member does not have a social security number. Provision of a social security number is not mandatory, but if a social security number is not given or an indication is not made that the signer does not have such a number, the application cannot be approved. The social security number may be used to identify the household member in carrying out efforts to verify the correctness of information stated on the application. These verification efforts may be carried out through program reviews, audits, and investigations and may include contacting employers to determine income, contacting a food stamp or welfare office to determine current certification for receipt of food stamps or TANF benefits, contacting the state employment security office to determine the amount of benefits received and checking the documentation produced by the household member to prove the amount of income received. These efforts may result in a loss or reduction of benefits, administrative claims or legal actions if incorrect information is reported.

For Contractor Use Only:

☐ Food Stamp/TANF household  ☐ Foster Child  ☐ Zero Income Application – Temporary Free Until (evaluate every 45 days)

Total Household Size: _______ Total Household Income: $ _______ Weekly / Biweekly / Twice a Month / Monthly / Annually

Note: If different income frequencies are listed, convert all income to an annual amount. (Circle one of the above)

Annual Income Conversion: Weekly x 52, Biweekly x 26, Twice a Month x 24, Monthly x 12

Eligibility Determination: ☐ Free  ☐ Reduced  ☐ Non-needly

Reason for Non-needly Status: ☐ Income too High  ☐ Incomplete Application  ☐ Other (Reason)__________

Signature of Determining Official: __________________________ Date Signed: __________________________
Child Participation Form

Name of Child: ___________________________ Name of Facility: Open Doors Preschool

Dear Parent:
Please fill out the following information so that your child may participate in the Child Care Food Program, which reimburses child care providers for serving nutritious, well-balanced meals to children in child care.

If child care hours are the same every day, please complete this chart.

<table>
<thead>
<tr>
<th>Day</th>
<th>Normal Hours in Care</th>
<th>Meals Normally Received While in Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mon - Fri</td>
<td>a.m. to a.m.</td>
<td>Breakfast ☐ AM Snack ☐ Lunch ☐</td>
</tr>
<tr>
<td></td>
<td>_____ p.m. to _____ p.m.</td>
<td>PM Snack ☐ Supper ☐ Eve Snack ☐</td>
</tr>
</tbody>
</table>

OR

If child care hours are not the same every day, please complete this chart.

<table>
<thead>
<tr>
<th>Day</th>
<th>Normal Hours in Care</th>
<th>Meals Normally Received While in Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>a.m. to a.m.</td>
<td>Breakfast ☐ AM Snack ☐ Lunch ☐</td>
</tr>
<tr>
<td></td>
<td>_____ p.m. to _____ p.m.</td>
<td>PM Snack ☐ Supper ☐ Eve Snack ☐</td>
</tr>
<tr>
<td>Tuesday</td>
<td>a.m. to a.m.</td>
<td>Breakfast ☐ AM Snack ☐ Lunch ☐</td>
</tr>
<tr>
<td></td>
<td>_____ p.m. to _____ p.m.</td>
<td>PM Snack ☐ Supper ☐ Eve Snack ☐</td>
</tr>
<tr>
<td>Wednesday</td>
<td>a.m. to a.m.</td>
<td>Breakfast ☐ AM Snack ☐ Lunch ☐</td>
</tr>
<tr>
<td></td>
<td>_____ p.m. to _____ p.m.</td>
<td>PM Snack ☐ Supper ☐ Eve Snack ☐</td>
</tr>
<tr>
<td>Thursday</td>
<td>a.m. to a.m.</td>
<td>Breakfast ☐ AM Snack ☐ Lunch ☐</td>
</tr>
<tr>
<td></td>
<td>_____ p.m. to _____ p.m.</td>
<td>PM Snack ☐ Supper ☐ Eve Snack ☐</td>
</tr>
<tr>
<td>Friday</td>
<td>a.m. to a.m.</td>
<td>Breakfast ☐ AM Snack ☐ Lunch ☐</td>
</tr>
<tr>
<td></td>
<td>_____ p.m. to _____ p.m.</td>
<td>PM Snack ☐ Supper ☐ Eve Snack ☐</td>
</tr>
<tr>
<td>Saturday</td>
<td>a.m. to a.m.</td>
<td>Breakfast ☐ AM Snack ☐ Lunch ☐</td>
</tr>
<tr>
<td></td>
<td>_____ p.m. to _____ p.m.</td>
<td>PM Snack ☐ Supper ☐ Eve Snack ☐</td>
</tr>
<tr>
<td>Sunday</td>
<td>a.m. to a.m.</td>
<td>Breakfast ☐ AM Snack ☐ Lunch ☐</td>
</tr>
<tr>
<td></td>
<td>_____ p.m. to _____ p.m.</td>
<td>PM Snack ☐ Supper ☐ Eve Snack ☐</td>
</tr>
</tbody>
</table>

☐ Check here if your child has no regularly scheduled hours of care

Signature of Parent/Guardian: ___________________________ Date: _____________

Printed Name: ___________________________ Phone Number: _____________ 1-108-01
Infant Feeding Form

CHILD CARE PROVIDER USE ONLY – Complete this shaded section before distributing to parents

<table>
<thead>
<tr>
<th>Child Care Provider Name:</th>
<th>Open Doors Preschool</th>
</tr>
</thead>
<tbody>
<tr>
<td>Iron Fortified Milk based formula offered:</td>
<td>Good Start</td>
</tr>
<tr>
<td>Iron Fortified Soy based formula offered:</td>
<td>Good Start Soy</td>
</tr>
</tbody>
</table>

Parents: Participation in the Child Care Food Program ensures that healthy meals are served to your baby while in child care. To help provide the best nutritional care for your baby, please complete the following information:

<table>
<thead>
<tr>
<th>Baby’s Name:</th>
<th>Baby’s Birth Date:</th>
</tr>
</thead>
</table>

Place a check mark (✓) by each of the following that apply for your baby:

My baby is:

- 0 to 3 months old
- 4 to 7 months old
- 8 to 11 months old

My baby is eating:

- Breastfed
- Breast and formula fed
- Formula fed

My baby can:

- Drink from a cup
- Eat from a spoon
- Sit alone without support

My baby is eating:

- Infant cereal
- Jar foods
- Table foods

Other things we should know about feeding your baby: (For example – feeding schedule, allergies, special feeding needs)

I understand that the child care provider will supply the above iron-fortified formulas for infants according to the Child Care Food Program requirements. *Note: Child care providers may request parents to supply clean, sanitized and labeled bottles on a daily basis.

If you formula-feed your baby, place a check mark (✓) by only ONE of the following:

- I prefer to have the child care provider supply formula. OR - I will supply my own formula.

If you breastfeed your baby, place a check mark (✓) by only ONE of the following:

- I will supply expressed (pumped) breastmilk. OR - I will supply expressed (pumped) breastmilk and supply my own formula to supplement as needed.

- I will supply expressed (pumped) breastmilk and have the child care provider supply formula as needed.

I understand the child care provider will supply infant cereal and baby food for infants 4 months and older according to Child Care Food Program requirements.

Place a check mark (✓) by only ONE of the following:

- I prefer to have the child care provider supply infant cereal and baby food. OR - I will supply my own cereal and baby food.

This facility has not requested or required me to provide infant formula or food for my baby; I understand that I have the choice of having my baby participate in the CCFP. I also understand that all bottles of breastmilk or formula and containers of food that I prepare and supply for my infant must be labeled with my baby’s name, and date and time of bottle preparation.

Parent Signature ___________________________ Date ___________________________

Rev. 10/2006

I-102-02
STUDENT ENROLLMENT CHECK SHEET

Child’s Name: ____________________________________________________________

Classroom: ______________________________________________________________

☐ About Our Learning Environment
☐ Welcome Letter
☐ Parent Policies
☐ Tuition Schedule
☐ Enrollment Form (front)
☐ Parental Agreement (back)
☐ Emergency Medical Form /Notarized/ (front & back)
☐ Student Information Sheet (front)
☐ Parent Permission Form (back)
  ☐ All about my baby (front)
  ☐ Tummy Sleeping Permission Form (back)
  ☐ All about my child (front & back)
☐ Parent Information Sheet
☐ Guidance & Discipline Procedures
☐ School Transportation Information Form (School Age only)
  ☐ Birth Certificate / Copy
  ☐ Physical Form/ from your pediatrician/
  ☐ Immunization Form / from your pediatrician/

☐ Child Care Food Program Application
☐ Food Program Child Participation Form
☐ Infant Feeding Form