

EMERGENCY CONTACT / PARENTAL CONSENT FORM

55 PA CODE CHAPTERS 3270.124(a)(b), 3270.181 & 182: 3280.124 (a)(b), 3280.181 & 182: 3290.124 (a)(b), 3290.181 & 182

CHILD'S NAME		BIRTHDATE
ADDRESS		
MOTHER'S NAME/LEGAL GUARDIAN		HOME TELEPHONE NUMBER
ADDRESS		
BUSINESS NAME		BUSINESS TELEPHONE NUMBER
ADDRESS		
FATHER'S NAME/LEGAL GUARDIAN		HOME TELEPHONE NUMBER
ADDRESS		
BUSINESS NAME		BUSINESS TELEPHONE NUMBER
ADDRESS		
EMERGENCY CONTACT PERSON(S)	NAME	TELEPHONE NUMBER WHEN CHILD IS IN CARE
PERSON(S) TO WHOM CHILD MAY BE RELEASED	NAME	ADDRESS
NAME OF CHILD'S PHYSICIAN/MEDICAL CARE PROVIDER		TELEPHONE NUMBER
ADDRESS		
SPECIAL DISABILITIES (IF ANY)	ALLERGIES (INCLUDING MEDICATION REACTION)	
MEDICAL or DIETARY INFORMATION NECESSARY IN AN EMERGENCY SITUATION	MEDICATION, SPECIAL CONDITIONS	
ADDITIONAL INFORMATION ON SPECIAL NEEDS OF CHILD		
HEALTH INSURANCE COVERAGE FOR CHILD or MEDICAL ASSISTANCE BENEFITS		POLICY NUMBER (REQUIRED)
PARENT'S SIGNATURE IS REQUIRED FOR EACH ITEM BELOW TO INDICATE PARENTAL CONSENT		
OBTAINING EMERGENCY MEDICAL CARE	ADMIN. OF MINOR FIRST - AID PROCEDURES	
WALKS AND TRIPS	SWIMMING	
TRANSPORTATION BY THE FACILITY	WADING	

PERIODIC REVIEW

SIGNATURE OF PARENT or GUARDIAN

DATE

SIGNATURE OF PARENT or GUARDIAN

DATE

AGREEMENT

55 PA CODE CHAPTERS 3270.123 &.181(C); 3280.123 &.181(c); 3290.123 &.181(c)

NAME OF CHILD		
FEE AMOUNT \$	PER-DAY-WEEK weekly	DAY PAYMENT TO BE MADE Friday morning ONLY thru Brightwheel
Services to be provided as part of the day care fee (examples; transportation, care, meals, etc.)		
Child observations and assessments		
CHILD'S ARRIVAL TIME	CHILD'S DEPARTURE TIME	PERSON(S) DESIGNATED BY PARENT TO WHOM CHILD MAY BE RELEASED
LATE FEE \$	PER MIN-HR	
Extra services to be provided at an additional fee if applicable		
*Tuition/co-payments are due for 52 weeks of the year OR as long as the child is enrolled		
*PHL Pre K tuition includes services from September to June only & student trips		

I, the parent/guardian;

received complete written program information at the time of enrollment. (§ 3270.121, 3280.121, 3290.121)

agree to update the emergency contact/parental consent form information whenever changes occur or every 6 months at a minimum. (§ 3270.124, 3280.124, 3290.124)

_____ SIGNATURE-OPERATOR DATE _____ SIGNATURE-PARENT OR GUARDIAN DATE

DATE OF CHILD'S ADMISSION
DATE OF WITHDRAWAL

PERIODIC REVIEW	
_____ SIGNATURE-PARENT OR GUARDIAN	_____ DATE



FAMILY TUITION AGREEMENT

Parent/Guardian name: _____

Child Name : _____

I, _____ (Parent/ Guardian) agree to pay a weekly tuition in accordance with the centers current tuition rates and my child's schedule. The total of which is paid on the first business day of services. To avoid a late charge please ensure tuition is paid Monday morning when the child is dropped off. I understand that I am responsible for **(52) fifty-two weeks** of payments if my child is enrolled in JCC's preschool and school age program and **(40) forty weeks** of payments for my PHL Pre k extended care student. This agreement will remain in force until such time as either party elects to terminate this agreement as outlined below. I understand that JCC typically has one tuition increase annually and I will receive notice of these 30 days prior to them going into effect.

I agree to and will comply with the conditions set forth below:

Late Departure/Early drop off: I agree to pay two (\$5) dollars for the first minute/per child and (\$1) dollar additional for each minute/per child for services provided by JCC outside of the regularly selected schedule (i.e. full-time schedule or part time schedule). I understand that I am responsible for paying the late fee in full the next day that my child attends any JCC program. I acknowledge the right of the school to notify an appropriate government agency if my child remains at the school an hour or more past the close of business.

Registration Fee: I agree to pay a one-time annual fee for my child (ren) depending on their age and the fee shown on the tuition sheet. I understand that this fee is non-refundable.

Discounts: If two children with the same family are enrolled full day every day, a 10% discount is applied to the youngest child's tuition depending if the family is approved for a scholarship which is based on financial eligibility.

Tuition Increases: A written notice will be given (30) day's prior to tuition increases and/or changes.

Camp T-shirt Fees: I agree to (\$6) six dollars/ per t-shirt for my child's camp t-shirt. I understand this is a part of my child's summer camp uniform and failure to purchase and or supply my child with this item may result in immediate suspension of services until a t-shirt is purchased and or worn.

Sign In / Out: Department of Human Services requires children to be signed in / out upon arrival / departure. The school will use the sign in / out times to determine the actual hours and days the school has provided services. I understand that I must call the school and have a verbal release form completed in advance to notify administration that someone not on the emergency contact list will be picking up my child. I am responsible for notifying the pick-up person not on the list to have photo id at the time up of pick up. Should the person not have

photo id, I will have to describe the person picking up my child and I do not hold JCCC responsible after my child has left any JCC program.

Sick / Vacation Policy: Tuition refunds cannot be given for individual days or weeks children are absent or for school holidays. Tuition payments are due each week that the child is enrolled at JCC.

Late Payments: Tuition is due on the Friday mornings only before services are provided. I agree to pay a \$15 per day late fee for tuition received after the Friday morning. Should tuition remain unpaid for two weeks for subsidy payments, JCC will withhold services until such time as all tuition and late fees are paid and will report delinquent fees to ERLC (Early Learning Resource Center). For cash paying parents, should tuition remain unpaid for one week, JCC will withhold services until such time as all tuition and late fees are paid.

Returned Checks: JCC does not accept checks or money order.

Dismissal: JCC reserves the right to suspend or dismiss students for delinquent payments or non-attendance. (See attendance policy)

Termination: To terminate this agreement, the parent must submit a written five (5) day notice to terminate or change the schedule.

I understand that this contract with JCC will remain in full force throughout our time at JCCC and supersedes all other agreements.

Termination or schedule change without (10) days written notice: In cases where (10) days written notice is not provided, the tuition will be pro-rated for attendance less than a week and you will still be required to pay for the (10) days following the termination or schedule change date, regardless of whether your child is currently active in the program.

Interest: If a balance remains owed 30 days after the termination date, I understand an interest fee of 10% will be added each month on the unpaid balance.

Collection: Tuition ledgers will be forwarded to collections when accounts reach \$200.00- or 30-days delinquent.

Administration Name _____ Date _____

Parent/Guardian Signature _____ Date _____



Health & Safety Policy Changes in a Child Care Program

Dear Parents and Families,

Given the COVID-19 (Coronavirus) crisis that is spreading through our country, I want to assure you that we are monitoring the situation closely. Based on information we have at this time, we will continue to operate Johnson Childcare Center to minimize disruption to you and your family. If the situation should change, we will notify you immediately.

Effective June 8, 2020 and for the foreseeable future, we will be taking extra precautions to ward off Coronavirus. We are taking these extra steps to support the health and safety of your children, your family and our staff.

Please take note of the following changes to our policies and procedures:

Check-In and Pick-Up

- Families will be greeted at the [DOOR/CURB] where a staff member will greet the child(ren). Parents and other family members will not be allowed inside the child care program. Prior to parents leaving the site, a trained staff member will take the temperature of their child(ren) and ask parents the following questions:

- o Do you live with anyone or have you had close contact with anyone who has been diagnosed with COVID-19 within the past 14 days?

- o Do you or anyone in your household have a fever, cough and/or shortness of breath?

- o Do you or your child(ren) have any other signs of communicable illness such as a cold or flu?

- Children and staff will be required to wash their hands immediately upon entering the building and hourly throughout the day. When children are received for drop-off, they will be escorted into the nearest bathroom where their hands will be washed prior to being brought to their classroom/child care area.

- Upon your arrival to pick up your child, a staff member will bring your child out to you. Doing so will limit direct contact and help us to maintain social distancing.

Healthy Environment

- We will separate children into smaller groups that fall within state or local guidelines.

- We will not share equipment and will clean equipment between uses.

- All classrooms will remain separated to reduce the number of children in one area and to reduce the possibility of viral transmission.

- Staff will disinfect high-touch surfaces, such as door handles, light switches, faucets, toys and games that children play with at least once daily.



- We will perform an enhanced deep cleaning every night in all areas, on all touched surfaces.
- Staff will have access to anti-bacterial hand sanitizers and disposable gloves and use them as needed.
- Staff will wash/scrub their hands and children's hands a minimum of hourly (noted by the CDC as the most effective preventive measure).
- No program tours will be given until further notice to reduce the number of visitors in the building.

Meal Preparation & Service

- All surfaces will be disinfected before meal preparation and feedings using CDC- or EPA approved products.
- All staff will wash hands before and after meal preparation and feeding.
- Each child's meal will be plated and served by staff, instead of served family-style.

Child Health

- Staff will receive education on COVID-19 symptoms as well as preventive measures.
- Children who start to experience symptoms of respiratory illness, including a fever of >100.4 while at child care, will be isolated from other children until they can be picked up.
- Until further notice, all program field trips will be suspended. Staff Health & Wellness
- Staff will receive additional training on infection control and workplace disinfection.
- Staff will not share their phone, devices or meal or utensils with one another or children.
- Staff will check their temperature at the beginning of each shift and notify their supervisor if >100.4 as well as self-monitor for signs and symptoms of COVID-19 and notify their supervisor if any develop (fever or respiratory symptoms).
- Staff will wash their hands immediately upon entering the program and immediately prior to leaving.
- Staff will not be allowed to work if they are feeling ill or experiencing respiratory symptoms.

Tuition

- As long as we are open and your child is in attendance, tuition will be due in full. This includes if we are only open for a portion of a week and need to close for the remainder of the week.
- If you are able to work from home and choose to keep your children at home, you will be required to pay ALL of your normal weekly tuition to retain your spot.
- If you are laid off or are part of a reduction in staffing and choose to keep your child at home, you will be required to pay ALL of your normal weekly tuition. We WILL NOT require proof of reduction from your employer. If ERLC is a funding source, please contact your case worker for next steps.



- If you choose to pull your child out and not pay, there is no guaranteed spot upon a request to return.

- At this time, if the state forces a closure for an extended period of time, NO tuition will be required to retain a spot for your child.

Communication

- If the current situation changes and it becomes necessary to update our procedures or close our program temporarily, we will notify key family contact by email.
- You may stay connected by receiving messages from Brightwheel for late-breaking program updates. Thank you for your understanding and patience as we implement these new procedures. Our goal is to minimize disruption while at the same time keeping you, your family and our staff healthy and well.

Sincerely,

Johnson Childcare Center

Guardian signature

Parent/Guardian Agreement

To protect our children and staff, I agree to keep my child at home if he/she has:

- Fever (a temperature of 100.4 or more)
- Cough
- Sore throat
- Chills
- Muscle pain
- Headache
- New loss of taste or smell

If my child has any of these signs of COVID-19, I will not send him/her back to school until:

- My child tested negative for COVID and is otherwise well enough to go back to school
OR
- A healthcare provider has seen my child and documented a reason for the symptoms other than COVID
OR
- All are true: 1) at least 10 days since the start of symptoms AND 2) fever free off anti-fever medicines for 3 days AND 3) symptoms are getting better.

If my child is diagnosed with COVID-19, I will not send him/her back to school until the following:

- It has been at least 10 days since my child first had symptoms **AND**
- My child has had no fever off anti-fever medicines (ex: Tylenol, Ibuprofen) for 3 days
AND
- My child's symptoms are getting better

If someone in my household is diagnosed with COVID-19 or my child is exposed to COVID-19, I will keep him/her home for 14 days.

If someone in my household develops new cough, shortness of breath or two of the following: sore throat, chills, muscle pain, headache, new loss of taste or smell, I will get that person tested for COVID-19. If that person tests positive, I will keep my child home for 14 days.

Child's name: _____

Parent/guardian name: _____

Parent/guardian signature: _____

Date: _____



Parent Health Risk Disclosure Form

I understand that whenever attending/visiting a childcare facility, there is a possibility of exposure to diseases including but not limited to cytomegalovirus, fifth disease, rubella, flu and other viruses. I understand higher risk factors exist that pertain to pregnant women or people with compromised immune systems.

My signature below indicates that I understand the inherent risk of exposure in a childcare setting. My signature further acknowledges I will hold the Johnson Childcare Center Inc, and all of its agents harmless and assume sole responsibility to manage these risks with my personal primary care provider.

Print Guardian Full Name Guardian Full Signature Date

Administrator Name Administrator Signature Date

Acknowledgment: I attest that all information that was completed on this application is truthful and accurate. In the event that any information changes, I will insure that the program received this information immediately in writing.

Guardian signature

SUBMIT FORM HERE: