A Child Drop-In Center

# **ENROLLMENT FORM**

### Thank you for becoming a member! We look forward to having you!

Parent\Guardian Info:

First Name:	Middle Initial:	Last Name:	
Relationship to child:	Address:	City/State:	Zip code:
Phone Number:	Work Phone Number:	Driver's License #:	

### Parent\Guardian Info #2:

First Name:	Middle Initial:	Last Name:	
Relationship to child:	Address:	City/State:	Zip code:
Phone Number:	Work Phone Number:	Driver's License #:	

#### Child Info:

First Name:	Middle Initial:		Last Name:	
Relationship:	Gender:		Age:	DOB:
Address:		Phone Number:		

### Authorized Pick up (Child only allowed to leave with the following person(s)) ID REQUIRED:

Name and Phone:	Name and Phone:
Name and Phone	Name and Phone:

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# **Emergency Contacts**

#### Contact #1:

First Name:	Middle Initial:	Last Name:	
Relationship to child:	Address:	City/State:	Zip code:
Phone Number:	Email Address (optional):	Driver's Licens	e# (optional):

### Contact #2:

First Name:	Middle Initial:	Last Name:	
Relationship to child:	Address:	City/State:	Zip code:
Phone Number:	Email Address (optional):	Driver's License# (optional) :	

\*Parents must provide written permission requesting a school- age child to ride a bus, walk to or from school or home, or to be released to the care of a sibling under 18 years old.



## MEDICAL

In the event I cannot be reached to make arrangements for emergency medical care, I authorize the person in charge to take my child to:

Physician's Name:	Address:	Phone:
Name of Emergency facility:	Address:	Phone:
Parent Signature:		

If the above info is not provided, in case of a serious incident, the child will be taken to the nearest hospital, Mission Trails Hospital.

Mission Trails Hospital - Address: 3333 Research Plaza, San Antonio, TX 78235 Phone: 210-297-3000

Signature:\_\_\_\_\_

Date:\_\_\_\_\_

List any special needs that your child may have, such as environmental allergies, food intolerances, existing illness, previous serious illness, injuries and hospitalizations during the past 12 months, any medication prescribed for long-term continuous use, and any other information which caregivers should be aware of:

Please list any allergies:



Immunization Records:					
My child attends this school:	My child attends this school:				
School Name:	Address:		State:	Zip Code:	
Phone:	City:				
Please check all that applies:					
□ Child's immunization records a	re on file at the so	chool and are curre	nt.		
□ Child's immunization records are attached to this application.					
$\Box$ Child's immunization exempt affidavit signed and dated attached to this application.					
Vision and Hearing screening are also on file.					
Parent Signature:		Date:			



<b>Pre-School 5 and Under:</b> If your child does not a child care operation, one of the following must be care operation or within one week of admission.			
Check <b>only one</b> option:			
□ Health Care Professional's Statement: I hav year and find that he or she is able to take part in t	e examined the above named child within the past he day care program.		
Signature – Healthcare Professional	Date		
□ A signed and dated copy of a health care profes	sional's statement is attached.		
Medical diagnosis and treatment conflict with t organization, which I adhere to or am a member of stating this.			
☐ My child has been examined within the past year by a health care professional and is able to participate in the day care program. Within 12 months of admission, I will obtain a health care professional's signed statement and submit it to the child care operation.			
Name:	Address of Health Care Professional:		
Parent Signature:	Date:		



## Media Consent

I,\_\_\_\_\_, give Mercy's Playhouse permission to take photos and or videos of my child(ren) that may be uploaded to our website <u>www.MercysPlayhouse.com</u>. The photos may also be uploaded to our social media platforms such as Facebook, Twitter, and Instagram. I understand that the content will be made public.

Signature:\_\_\_\_\_

Date:\_\_\_\_\_

# Field Trips, Water Play, and Transportation

Mercy's Playhouse will not be participating in field trips and water play. Mercy's Playhouse also does not provide transportation to and from the facility.

## Parent Handbook

I have received the parent handbook for Mercy's Playhouse and I acknowledge it's rules and policies within. I understand that Mercy's Playhouse is not responsible for lost and stolen items. I understand that Mercy's Playhouse and the staff cannot be held responsible for healthcare costs should an accident or illness occur within our care. I understand that Mercy's Playhouse reserves the right to refuse any child for any reason. I understand that Mercy's Playhouse will be providing snacks at no cost three times a day.

Signature:	
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Date:\_\_\_\_\_



#### Operational Discipline and Guidance Policy

This form provides the required information per 26 Texas Administrative Code (TAC) minimum standards §744.501(7), §746.501(a)(7), and §747.501(5).

Directions: Parents will review this policy upon enrolling their child. Employees, household members, and volunteers will review this policy at orientation. A copy of the policy is provided in the operational policies.

#### **Discipline and Guidance Policy**

Discipline must be:

- 1) Individualized and consistent for each child;
- 2) Appropriate to the child's level of understanding; and
- 3) Directed toward teaching the child acceptable behavior and self-control.

#### A caregiver may only use positive methods of discipline and guidance that encourage self-esteem, self-control, and selfdirection, which include at least the following:

- 1) Using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
- Reminding a child of behavior expectations daily by using clear, positive statements;
- 3) Redirecting behavior using positive statements; and
- 4) Using brief supervised separation or time out from the group, when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age.

## There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited:

- 1) Corporal punishment or threats of corporal punishment;
- 2) Punishment associated with food, naps, or toilet training;
- Pinching, shaking, or biting a child;
- Hitting a child with a hand or instrument;
- 5) Putting anything in or on a child's mouth;
- 6) Humiliating, ridiculing, rejecting, or yelling at a child;
- 7) Subjecting a child to harsh, abusive, or profane language;
- Placing a child in a locked or dark room, bathroom, or closet with the door closed or open; and
- 9) Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age.

#### Additional Discipline and Guidance Measures (Only Applies to Before or After School Program (BAP)/School Age Program (SAP) that Operates under 26 TAC Chapter 744)

A program must take the following steps if it uses disciplinary measures for teaching a skill, talent, ability, expertise, or proficiency:

- Ensure that the measures are considered commonly accepted teaching or training techniques;
- Describe the training and disciplinary measures in writing to parents and employees and include the following information: (A) The disciplinary measures that may be used, such as physical exercise or sparring used in martial arts programs;
- (A) The disciplinary measures that may be used, such as physical exercise of spanning use (B) What behaviors would warrant the use of these measures: and
- (C) The maximum amount of time the measures would be imposed;
- Inform parents that they have the right to ask for additional information; and
- Ensure that the disciplinary measures used are not considered abuse, neglect, or exploitation as specified in Texas Family Code §261.001 and TAC Chapter 745, Subchapter K, Division 5, of this title (relating to Abuse and Neglect).

Form 1099 July 2019-E

#### Form 1099 Page 2 / 07-2019-E

Signature				
This policy is effective on the following date				
Signed by:	Role:			
	Parent	Caregiver/Employee	Household Member (CH. 747 only)	
Minimum Standards Related to Discipline				
<ul> <li>Title 26, Chapter 746 Subchapter L: http://texreg.sos.state.tx.us/public/readta</li> </ul>	c\$ext.ViewTAC?	?tac_view=5&ti=26&pt=1&	ch=746&sch=L&rl=Y	
Title 26, Chapter 747 Subchapter L <u>http://texreg.sos.state.tx.us/public/readtac\$ext.ViewTAC?tac_view=5&amp;ti=26&amp;pt=1&amp;ch=747&amp;sch=L&amp;rl=Y </u>				
<ul> <li>Title 26, Chapter 744 Subchapter G: http://texreg.sos.state.tx.us/public/readta</li> </ul>	csext.ViewTAC?	?tac_view=5&ti=26&pt=1&	ch=744&sch=G&rl=Y	