

Blossom Childcare Center Admission Agreement

Personal Information

Child's Last Name _____ First Name _____ Date of Birth _____ M/F

Parent or Guardian Name _____ Relationship to Child _____

Street _____ City _____ State _____ ZIP Code _____

Work Phone Number _____ Home Phone Number _____ Cell Phone Number _____

E-mail _____

Second Parent or Guardian Name (if applicable) _____ Relationship to Child _____

(Check if below same as above)

Street _____ City _____ State _____ ZIP Code _____

Work Phone Number _____ Home Phone Number _____ Cell Phone Number _____

E-mail _____

Authorized persons for pick-up or drop-off (required also is photo ID of each person(s) listed). *Please Note- Daycare must be notified IMMEDIATELY if any changes to this list:

1) Name _____ Relationship to Child _____

2) Name _____ Relationship to Child _____

3) Name _____ Relationship to Child _____

4) Name _____ Relationship to Child _____

Emergency information for Child:

In case of life threatening medical emergency, 911 will be called or child will be taken to the emergency room.

Any known medical conditions (please note Blossom is not authorized to enroll children who are not ambulatory) _____

Any medications taken (please note Blossom is not authorized to dispense or administer medications or enroll/care for children with chronic medical conditions) _____

Drug/medication Allergies _____ Food Allergies _____

Pediatrician Name, number and address: _____

Emergency contacts:

1) Name/Number(s) _____ Relationship to Child _____

2) Name/Number(s) _____ Relationship to Child _____

Sign and date _____

Sign and date _____

Schedule Requested (if less than 5 full days a week, please circle applicable days and am or pm or both)

- 5-Days: Monday Tuesday Wednesday Thursday Friday
 4-Days: Monday am/pm, Tuesday am/pm, Wednesday am/pm, Thursday am/pm, Friday am/pm
 3-Days: Monday am/pm, Tuesday am/pm, Wednesday am/pm, Thursday am/pm, Friday am/pm

Child Care Program

- Infant (birth-24 mo) Toddler (24-36 mo) Preschool (3-5 yo)

FOR OFFICE USE Enrollment date: _____ 1st day of attendance: _____ Female Male

Monthly Tuition Schedule: Pay online at www.solunahealth.com. If you have any questions about the payment of fees contact the Director at (415) 332-2600 ext 2#. There are not partial day fees (ie 4.5, 3.5 days) as these are rounded up to the full day.

	Core Program 9am to 5pm	Extended Care 7:30am to 9am & 5:00 to 5:30pm	Total	Projection/Month
Full Rate				
Daily Rate	\$92	\$20	\$112	\$448
Weekly Rate	\$510	\$50	\$560	\$2240
Any 4 Days	\$408	\$40	\$448	\$1792
Any 3 Days	\$305	\$30	\$335	\$1340
<hr/>				
Tier 1				
Daily Rate	70	20	90	360
Weekly Rate	300	50	350	1400
Any 4 Days	250	40	290	1160
Any 3 Days	240	30	280	1120
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Tier 2				
Daily Rate	10	20	30	120
Weekly Rate	125	50	175	700
Any 4 Days	75	40	115	460
Any 3 Days	65	30	95	380
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Tier 3				
Daily Rate	NA	NA	NA	NA
Weekly Rate	30	20	50	200
Any 4 Days	20	10	30	120
Any 3 Days	NA	NA	NA	NA

Tuition and Fees

- A registration fee equal to one-half the monthly tuition is due at least two weeks before your child begins attending BLOSSOM Child Care. The registration fee is nonrefundable \$200.
- The first month's tuition is due upon submission of application.
- Each month thereafter, any/all tuition and fees are due by the 28th of the preceding month.
- Tuition and fees may be paid by online using our auto-payment system.

-The monthly fee is payable every month even when your child(ren) is/are absent from the program.

-If your child's schedule or program changes, the fee will be adjusted according to the monthly fee schedule.

-The fee is also contingent upon the verification of child eligibility as being ambulatory, non-medication requiring as per Blossom licensing.

-I/We understand that I/We must submit a withdrawal form at least 30 days prior to withdrawing my/our child/ren. Failure to do so will result in the assessment of Child Care fees in conformance with BLOSSOM Child

Care program fee/prorating schedule.

-I/We understand that no credit will be given for short-term absences.

-Additional fees may be assessed for special activities or field trips.

_____ (initial) _____ (initial)

Sign and date _____ Sign and date _____

Liability Release

I/We, the undersigned, agree to hold harmless, defend and indemnify Blossom, Naureen Shaikh, Soluna Health, Inc., Mobile Medical Team International, Harmony Health LLC, and each and every officer, employee and agent of each part of the above named from any claims, damages, injuries, losses, causes of action, demands and all costs and expenses incurred in connection therewith (in this paragraph collectively referred to as liability) resulting from or in any manner arising out of or in connection with this agreement, including but not limited to liability which results from the concurrent negligence of myself or my/our child but not including the liability which results from the sole negligence of the Blossom, Naureen Shaikh, Soluna Health, Inc., Mobile Medical Team International , Dr. Naureen Shaikh, Harmony Health LLC, I/ We also acknowledge receipt of the BLOSSOM parent handbook containing policies and procedures, and agree to abide by these policies and procedures while my/our child is enrolled in the program. In addition, I/we agree to abide by any new policies when written notice of them is received. I/We have read and understood the above Liability Release.

Parent/Legal Guardian's signature _____ Date _____

Second Parent/Legal Guardian's signature _____ Date _____

Permission for Walking/Driving Field Trips

From time to time the children visit neighborhood facilities such as the fire station, local museums and parks, etc., and if parents have memberships for the child(ren) at the Academy of Science or the Bay Area Discovery Bay Museum. These are supervised trips within walking or driving distance of the Center, and we must have permission for your child to participate. Blanket trip authorization takes the place of parent's signature on permission slips for individual trips. However, parents will be notified in advance of dates and schedules of trips. My child may participate in walking or driving field trips.

Yes No

_____ (initial) _____ (initial)

Sign and date_____

Sign and date_____

Permission to Apply Sunscreen

Parents are to supply the Child Care Center with sunscreen for their child. Sunscreen must be labeled with your child's name. There will be absolutely no sharing of sunscreen among the children. I/We give permission for staff at BLOSSOM Child Care Programs to apply a sunscreen product of SPF 15 or higher to my/our child, as specified below, which I agree to provide, when he or she will be playing outside, especially during the months of March through October and between the daily times of 10 a.m. and 4 p.m. I/We understand that sunscreen, which I will provide, may be applied to exposed skin, including but not limited to the face, tops of the ears, nose and bare shoulders, arms and legs.

I/We do not know of any allergies my/our child has to the supplied sunscreen.

_____ (initial) _ _____ (initial)

I/We have read manufacturer's information on the container regarding the type and use of sunscreen for my/our child.

_____ (initial) _ _____ (initial)

I/We have provided the following brand/type of sunscreen for use on my/our child: _____

For medical or other reasons, please do not apply sunscreen to the following areas of my child's body: _____

No, do not apply sunscreen to my child.

Permission to Apply Diaper Cream (For parents of children wearing diapers and/or training pants)

Parents are to supply the Child Care Center with diaper cream for their child/ren. Diaper cream must be labeled with your child's name. There will be absolutely no sharing of diaper cream among the children. I/We give permission for staff at BLOSSOM Child Care Programs to apply diaper cream to my/our child, as specified below, which I agree to provide. I/We understand that diaper cream, which I will provide, will be applied to exposed skin on the diaper area. I/We do not know of any allergies my/our child has to the supplied diaper cream.

_____ (initial) _ _____ (initial)

I/We have read the manufacturer's information on the container regarding the type and use of diaper cream for my/our child.

_____ (initial) _ _____ (initial)

I/We have provided the following brand/type of diaper cream for use on my/our child:

No, do not apply diaper cream to my child.

Sign and date _____

Sign and date _____

Discipline Statement & Agreement

The goal of the centers' discipline policy is to assist children in developing emotional regulation and self-discipline through respectful interactions that support children's emotional growth. The preschool years are a time of immense cognitive, physical and emotional growth for young children. Young children are still egocentric, meaning they still think mostly of their own needs and wants as opposed to the needs of others. Because of this, it is not unusual for young children to use physical or verbal aggression in an attempt to get their needs and wants met. It is our job as the adults in the environment to guide children through this time by setting clear limits and following through appropriately and consistently.

We teach socially acceptable behavior by providing an environment that is responsive to the needs of the children. Materials and activities are age appropriate. Adults model respectful behavior and provide positive reinforcement for appropriate behavior. Clear and consistent limits are set which protect everyone physically and emotionally. We never use threats or derogatory remarks as a form of discipline, nor do we ever withhold (or threaten to withhold) food. We use redirection and other positive actions in order to teach the children appropriate, socially acceptable and respectful behavior. Teachers continuously check the play areas to ensure there is sufficient equipment for a group of children in order to maximize the success of children playing together. Teachers assist children in pro-social interactions.

-I work with parents/guardians of children in my care to determine the cause of misbehavior and deal with behavior positively.

-I use strategies that allow the child to take responsibility for his/her actions. In addition, I focus on teaching children appropriate behavior. I do not use threats or bribes; however, I do use Time Out when I feel the child needs a break away from the group. I focus on teaching children how to interact socially and continually reinforce the limits in my home. Physical punishment will not be used, even if requested by the parent.

-I expect children in my care to respect others, respect the environment and respect themselves. Hitting, kicking, spitting, biting, hostile verbal behavior and other behaviors, which will hurt another child, are not permitted.

-Each child will be dealt with individually. Consequences will occur immediately after the behavior. As a parent, I ask you not to punish your child at home for misbehavior shown while in my care. Please trust that I will handle the matter at my home. Furthermore, I will not discipline your child for an incident, which happened anywhere other than the daycare home.

-If your child continually misbehaves, I will call you and discuss the difficulty by phone or make an appointment to discuss the difficulty with you. I will not discuss problems in front of your child, other children or other parents.

-I will keep you posted on all happenings that we are involved in at my home. If I am experiencing behavior difficulties with your child, I will let you know as soon as possible. I hope that together we can create a behavior management strategy, which will control the behavior.

-In those instances when a behavior is very disruptive or harmful to the child or other children, I will discuss the issue with you. If an intervention can be made and will warrant success, the child can remain enrolled. If you will not seek appropriate assistance or we cannot effectively meet the needs of your child, you will be asked to make other childcare arrangements. I will assist you to the best of my ability to help you find other arrangements. Thank you in advance for your assistance!

(Childcare Provider)

Date

(Guardian / Parent Signature)

Date

(Guardian / Parent Signature)

Date

Parents' Rights

As a parent/authorized representative of a child in a state-licensed child care center, you have certain rights mandated by the state of California.

You Have the Right to:

1. Enter and inspect the child care center without advance notice whenever children are in care.
2. File a complaint against the licensee with the licensing office and review the licensee's public file kept by the licensing office.
3. Review, at the child care center, reports of licensing visits and substantiated complaints against the licensee made during the last three years.
4. Complain to the licensing office and inspect the child care center without discrimination or retaliation against you or your child.
5. Request in writing that a parent not be allowed to visit your child or take your child from the child care center, provided you have shown a certified copy of a court order.
6. Receive from the licensee the name, address and telephone number of the local licensing office.
7. Be informed by the licensee, upon request, of the name and type of association to the child care center for any adult who has been granted a criminal record exemption, and that the name of the person may also be obtained by contacting the local licensing office.
8. Receive, from the licensee, the Caregiver Background Check Process form.

Note: California state law provides that the licensee may deny access to the child care center to a parent/authorized representative if the behavior of the parent/authorized representative poses a risk to children in care.

Personal Rights of Children

As a child in a state-licensed child care center, a child has certain rights mandated by the state of California. The child care program shall ensure that each child is accorded personal rights.

Each Child Has the Right to Be:

1. Accorded dignity in her or her personal relationships with staff and other persons
2. Accorded safe, healthful and comfortable accommodations, furnishings and equipment to meet his or her needs
3. Free from corporal or unusual punishment, infliction of pain, humiliation, intimidation, ridicule, coercion, threat, mental abuse or other actions of a punitive nature including but not limited to: interference with functions of daily living including eating, sleeping or toileting; or withholding of shelter, clothing, medication or aids to physical functioning
4. Free from restraint (being locked in any room, building, or center premises by day or night)
5. Free from usage of any restraining device

Sign-In at the Beginning of the Day

You must bring your child to his or her room and talk to program staff before you sign in. Plan to spend a few minutes discussing anything that might affect your child's day.

Because your signature is what gives us permission to care for your child, and because the center can be fined for missing signatures, you will be notified if you fail to sign in. Parents must return to the center to sign in. We cannot sign in for you, according to state licensing regulations. If parents fail to return in this situation they may not bring their child back into the program without first meeting with the Director.

Sign and date _____

Sign and date _____

Your Child's Personal Belongings

There are times when your child may need an item (such as a toy) from home to help him or her make the transition from home to child care. However, because children are not permitted to bring their own toys into the center, we ask that all transitional items of this nature be kept in the car or go home with the parent and brought back for the child to enjoy when they are picked up. This prevents lost and/or damaged items. Children are permitted to bring a soft animal and/or blanket for nap time. Please remember to label any nap time items and store them in your child's cubby.

Sign-Out at the End of the Day

At the end of the day, you must sign-out your child. Remember only you or someone authorized in writing by you may pick up your child. You may be asked to show a photo ID to staff who are not familiar with you. Anyone you authorize to pick up your child must show a photo ID. Remember to check your child's cubby for items to take home and to talk to program staff about your child's day.

Only authorized representatives listed on the child's Identification and Emergency Information sheet are allowed to remove the child from the center (or allowed onsite to visit the children). If a parent wants to add an authorized representative, they must update their Identification and Emergency Information sheet in their child's file or submit a written request in person. In an emergency situation, a parent can fax a written request along with a copy of their driver's license to the administrative office. Any faxed requests must be approved by the program supervisor or program manager.

Your child anxiously anticipates your arrival. You should call the program if you are going to be later than usual. The center closes at 5:00 p.m. **Late fees** are charged for picking up your child after closing time (see Parent Handbook for details).

I/We will notify BLOSSOM Child Care Programs **immediately** (before next drop-off or pick-up- whichever comes first) if there is any change to the custodial status of this child as stated on this agreement.

I/We certify that the information contained on this form is true and correct.

I/We understand that it is on this basis that my/our child may be admitted and enrolled.

Any misstatements or omissions may result in enrollment being denied or revoked.

Parent/Legal Guardian's signature _____ Date _____

Parent/Legal Guardian's signature _____ Date _____

FOR OFFICE USE

Packet Received by _____

Given to Program Director _____

Date Deposit _____ Amount Received _____ Received by _____

STATE OF CALIFORNIA COMMUNITY CARE LICENSING DIVISION FORMS

Most of these forms are available online as fillable forms at the division Web site (http://www.dss.cahwnet.gov/cdssweb/On-lineFor_293.htm)

- LIC 613A Personal Rights–Child Care Facility
- LIC 627 Consent for Emergency Medical Treatment
- LIC 700 Identification and Emergency Information
- LIC 701 Physician’s Report–Child Care Center
- LIC 702 Child’s Preadmission Health History–Parent’s Report
- LIC 995 Parents’ Rights
- PM 286 Immunization Record and Letter (not available online)

BLOSSOM FORMS/PUBLICATION

- Parent Handbook Received
- Admission Agreement

INDIVIDUAL PROGRAM FORMS AND INFORMATION

Infants

Completed Forms

- Discipline Statement Infant/Toddler
- Infant Meal Plan

Received By Parent/Guardian

- Parent Handbook
- Infant Schedule of Daily Activities
- Sample Menu
- Change /Withdrawl Forms
- Parent Checklist

Preschoolers

Completed Forms

- Preschool Daily Schedule
- Discipline Statement Preschool/School-Age

Received By Parent/Guardian

- Parent Handbook
- Infant Schedule of Daily Activities
- Sample Menu
- Change /Withdrawl Forms
- Parent Checklist

Checklist

Please use this checklist to make sure you have completed all forms. Completed forms should be returned to the Director at least two weeks before your child’s enrollment date. Parent and child are required to visit the child’s new classroom three to five times before the child begins regular attendance.

Sign and date _____

Sign and date _____