Kids R Kids Learning Academy

Distribution
- *Child's File*
- *Transportation Log*
- *Field Trip Log (School-Age Only)*

Health and Emergency Permission

This form must be completed for all enrolled children annually and as changes occur

Child

Child's Full Name _____ Age _____ Gender_____ Date of Birth ___/___/____

Child's Home Address _____ Home Phone _____

Parent/Guardian(s)

Parent/Guardian Name_____ Phone 1: _____ Email: _____

Parent/Guardian Name_____ Phone 1: _____ Email: _____

Medical Information

Doctor to be contacted when parents cannot be reached:
Name Full Address Telephone

_____

Dentist:
Name Full Address Telephone

_____

Health Insurance Provider:
Name Full Address Telephone

_____

Does your child have special needs affecting participation in school activities? ☐ Yes ☐ No
Specify: _____

Does your child have allergies? ☐ Yes ☐ No
Is your child on prescribed medication for Illness/Allergies? ☐ Yes ☐ No
Specify: _____

Actions Taken: _____

_____

Weight of Child: _____

Emergency Contacts

The child may be released to the person(s) signing this agreement or to the following with photo ID:
Name Address Telephone Relationship

_____

_____

_____

Emergency contact(s) when parents cannot be reached:
Name Address Telephone Relationship

_____

_____

_____
Parent/Guardian Signature

_____/_____/_____
Date

_____
Owner/Director Signature

_____/_____/_____
Date

0626

This form was developed by Kids 'R' Kids International, Inc. It's important to review State Guidelines regularly to ensure compliance.

KRK/REV/02/2020

Distribution
- *Child's File*
- *Transportation Log*

Transportation Agreement

The following information is required to be updated by Kids 'R' Kids annually and when transportation situation changes

Child's Full Name: _____ Date of Birth ___/___/___

Kids 'R' Kids #15 emergency transportation/medical procedure:

1. Call emergency medical team, if necessary
2. Contact parent/guardian (phone, email, text)
3. Contact alternate emergency contact, if necessary
4. Emergency medical team transports child to hospital.
5. Kids 'R' Kids representative will accompany child to hospital.

Emergency Medical Facility the center uses: Advent Health Of Riverview

Address: 9330 US-301, Riverview, FL 33578 Phone (656) 233-5100

I, _____give permission for Kids 'R' Kids #15 to seek medical attention and /or transport my child_____, in the event of any emergency. I further agree to hold harmless and release Kids 'R' Kids #15 and Kids 'R' Kids International, Inc. from all liability. I further agree to keep the facility informed of any changes in the information below.

For School Age Use Only: *If the child relocates to another school or the hours change, this form must be updated immediately*

Name of School: _____

School Address: _____

School Phone: _____

- In the event the designated location is unable to receive children they will be returned to Kids 'R' Kids #15.
- It is vital that Kids 'R' Kids #15be notified of any changes in the above scheduled transportation.
- Kids 'R' Kids #15 will assume the above schedule of transportation will be followed unless we receive different instructions from parents in writing. Instructions should be received at Kids 'R' Kids #15 by the earliest possible time before scheduled pickup or drop off.

I, _____ agree for my child to be transported by Kids 'R' Kids #15

☐ **To school at _____ (am/pm)**
☐ **From school at _____ (am/pm)**

On the following days: Monday Tuesday Wednesday Thursday Friday

_____ _____/_____/_____
Parent/Guardian Signature Date

_____ _____/_____/_____
Owner/Director Signature Date

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Photo & Social Media Release

For and in consideration of the opportunity to have my minor child's name, voice, picture, portrait, artwork and/or likeness published and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the undersigned, on behalf of myself and my minor child, hereby agree as follows:

1. I hereby grant Kids 'R' Kids International, Inc., Kids 'R' Kids # 15, and its affiliates, franchisees, nominees, licensees, successors and assigns and those acting under their permission (hereinafter "KRK"), the unrestricted, absolute, perpetual, worldwide right to:

a. use my and my minor child's name, voice, picture, portrait, artwork and/or likeness, however obtained;

b. reproduce, copy, modify, alter, edit, publish, use, create derivatives in whole or in part, without limitation, my and my child's image, picture, portrait, artwork and/or likeness in still and/or video photography, film or tape taken of me or my minor child by or on behalf of KRK.

c. display, exhibit, distribute, transmit or broadcast the above or any part thereof; in any project or medium, whether now or hereafter existing, including, without limitation printed publications, television, radio, the internet, any online service or website, blog or social media, including, without limitation: Twitter, Facebook, Instagram, any number of times and for any purpose, including, without limitation, promotional, advertising and marketing purposes.

2. I agree that any picture, portrait, artwork or other product or material derived there from is wholy owned by KRK and that KRK may copyright any product or material containing same. If I receive any copy thereof, I shall not use it for any purpose nor authorize its use by anyone else.

3. I hereby waive my right to inspect and/or approve the finished product or material, or to the eventual use that it might be applied.

4. I hereby release and discharge KRK from and against any claim or liability arising out of invasion of privacy, right of publicity, defamation, portrayal in a false light, misappropriation, and copyright infringement arising out of or in connection with the use of materials referenced hereunder, including without limitation the use of my or my minor child's name, voice, picture, portrait, artwork and/or likeness in any manner authorized by this Release, whether now known or arising in the future.

5. I hereby warrant that I am eighteen years old or older and am the parent and/or legal guardian of the minor child named below and am competent to contract for the minor child named herein as the above is concerned. I have read the foregoing release and warrant that I fully understand the contents hereof. I agree that this Release is intended to be as broad and inclusive as permitted under the laws of the State of Florida, and that if any portion thereof is held to be invalid, that the balance shall continue in full force and effect.

6. This Release constitutes an Agreement between myself and KRK and contains the entire understanding between myself and KRK regarding the subject matter hereof. This Release cannot be modified except in a writing signed by all parties hereto and shall be governed in accordance with the laws of the State of Florida.

Yes _____ NO _____ My child's image may be used on the KRK social media platform.

Yes _____ NO _____ My child's image may be used within KRK for classroom displays and artwork.

Parent/Guardian Printed Name / Signature _____ Child's Full Name _____

Food Allergies, Food Activity, Dietary Restrictions, Alternate Nutrition, Absences & Immunizations

KRK is dedicated to promoting healthy eating. With our Apple Accreditation, KRK ensures each child is receiving a nutritionally balanced meal.
Children are encouraged to eat the meals provided by the center and must follow our set meal times. Each classroom schedule lists AM snack, lunch, PM snack and an additional late snack is provided in our 1 & 2-year-old rooms. Food from home, requires a doctor's note stating the child's allergy or food restriction. Items need to be labeled with the child's full name and date. Food should be dropped off in the café in a labeled zippered school lunch bag. If food needs to be served hot, it must be placed in a thermos as we do not reheat food. Our menu provides a daily vegetarian option. We are a nut free school and all foods MUST follow our dietary guidelines. Items like chips, Cheetos, Kool-Aid and soda are not permitted. If you need to choose an alternative milk product, we accept soy, rice, lactaid, oat or a non-nut product. We are unable to serve almond, cashew or coconut milk. A written emergency plan as outlined by the Physician may be required for select allergy cases.
The Fl. Dept of Health requires all kids be immunized but we do admit children that may not be immunized due to religious or medical beliefs. A waiver is required in a case like this.
DCF requires every parent to report their child's absence no later than 9:30 am.
Our curriculum and additional activities such as field trips, enhancements and special events occasionally involve food outside of our daily menu. Your signature below will serve as authorization for your child to participate in these additional nutrition activities.

_____ _____

Child's Full Name Parent/Guardian Name / Signature

Authorization to have child removed from classroom (For Enhancements, Volunteers, Therapist, Tutors.....)

I hereby authorize my child to be removed from their classroom to participate in any activity I have signed them up for.

_____ _____

Child's Full Name: Parent/Guardian Printed Name

_____ _____/_____/_____

Parent/Guardian Signature: Date

DISTRACTED ADULT

During the 2018 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes to provide parents with information regarding the potential for distracted adults to fail to drop off a child at the facility/home and instead leave them in the adult's vehicle upon arrival at the adult's destination. The Distracted Adult brochure is posted in the lobby.

Signature of Parent or Legal Guardian: _____ Name of Child _____

"THE FLU" A GUIDE FOR PARENTS

The parent's or legal guardian's signature verifies knowledge of the current brochure on the Influenza Virus and Flu guide posted in the lobby.

Signature of Parent or Legal Guardian_____ Name of Child : _____

KNOW YOUR CHILD'S DAY CARE CENTER

Section 10M-12.008 (2) F.AC. requires that parents must receive a copy of the Child Care Facility Brochure, KNOW YOUR CHILD'S DAY CARE CENTER. The Parent's or legal guardian's signature verifies receipt of the child care brochure. Please complete the following:
I, _____, have received a copy of the Child Care Facility Brochure, KNOW YOUR CHILD'S DAY CARE CENTER.

Signature of Parent or Legal Guardian: _____ Name of Child : _____

FAMILY HANDBOOK AGREEMENT

I agree to abide by all policies / procedures of Kids 'R' Kids as outlined in this Enrollment Agreement and the Family Handbook. I hereby agree to all age-appropriate screenings and assessments as discussed in the Family Handbook. The KRK Handbook is sent out electronically upon attending Kids 'R' Kids and it is also available on our website www.krkcirca.com for your review. You are hereby confirming that you will read, understand and follow the policies outlined in our family handbook.

Signature of Parent or Legal Guardian_____ Name of Child: _____

DISIPLINE, EXPULSION & BEHAVIOR MANAGEMENT

Praise, positive reinforcement, and redirection are often effective methods for the behavior management of children. When children receive positive, non-violent, and understanding interactions from adults and others, they develop good self-concepts, problem-solving abilities, and self-discipline. Based on this belief of how children learn and develop values, this facility will practice the following discipline and behavior management policy taken from Kids 'R' Kids, International operational guidelines and the NAEYC Code of Ethics.

Where appropriate, we will use positive reinforcement, time-away, and re-direction with children to guide children toward appropriate behavior. Guidance will be appropriate, respectful, not tied to food or toileting and within appropriate developmental expectation. At times a verbal reprimand, parent conference, or more serious discipline, up to and including dismissal, may be warranted. Corporal punishment is not permitted. We follow the NAEYC Code of Ethics – Principle-1.1: "Above all, we shall not harm children. We shall not participate in practices that are disrespectful, degrading, dangerous, exploitative, intimidating, emotionally damaging, or physically harmful to children."

Consistent application of disciplinary policies is sought, although each situation is judged on its merits, and every effort will be made to ensure that decisions are not arbitrary.

In some circumstances, a child may be placed on probation. Children who are placed on behavior probation may be required, at the school's discretion, to have their family sign a Behavior Action Plan with the school as a condition of continued enrollment. Failure to comply with the stipulations in the disciplinary probation agreement may result in dismissal.

Children may be dismissed for serious first offenses; repeat infractions (even if not related); conduct resulting in harm, damage, or disruption to the educational environment; parent or family member causing disruption to the School or the School's educational mission; non-payment of tuition or fees. Any matter taken under consideration by the Owner directly may be grounds for expulsion. The school reserves the right to dismiss any child at the sole discretion of the School's Director or Owner.

In addition, the school may report to the appropriate governmental authorities any actions that appear to violate law.

Signature of Parent or Legal Guardian _____Name of Child _____

_____ _____

Program Manager Date

Distribution
- *Infant/Toddler Classroom Forms*
- *Preschool/School-Age Classroom Forms*
- *Kitchen Log*
- *Child's File*

Child Allergy Profile

Update annually or as child's information changes

(place child's picture here)

Child's Full Name: _____ Suite: _____

Allergy To:

_____

Symptoms of Allergic Reaction:

_____

_____

_____

_____

Emergency Care Plan:

_____

_____

_____

_____

_____ ___/___/___

Parent/Guardian Signature Date

_____ ___/___/___

Owner/Director Signature Date

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KRK/REV/12/2019