

of shadow Creek Ranch

12015 Broadway St. Pearland, TX 77584 Office: 713-436-3688 Fax: 713-436-3664

CHILD				
LAST NAME	FIRST NAME		MALE ( )	D.O.B. (Month/Day/Year)
			FEMALE ()	//
	CHILD'S	ADDRESS		
STREET:				
CITY, STATE:				
ENROLLMENT DATE:		WITHD	RAWAL DATE:	
STARTING SUITE NUMBER:		RATE:		
1 <sup>ST</sup> PARENT		2 <sup>ND</sup> PARE	NT	
LAST NAME		LAST NAM	1E	
FIRST NAME		FIRST NAM	ИЕ	
STREET		STREET		
CITYSTATE	ZIP	CITY	STA	TEZIP
HOME PHONE		HOME PH	ONE	
CELL PHONE		CELL PHONE		
WORK PHONE		WORK PH	ONE	
PLACE OF EMPLOYMENT		PLACE OF EMPLOYMENT		
EMAIL		EMAIL		
CHILD'S LEGAL GURDIANSBOTH PARENTSMOTHERFATHEROTHER				
CHILD'S LIVING ARRANGEMEN				
WATER ACTIVITIES- I HEREBY ( ) GIVE( ) DO NOT give consent for my child to participate in these water				
activities: () SPLASH PAD () WATER TABLES				
EXPECTED DAYS/HOURS IN CARE ( ) MON ( ) TUE ( ) WED ( ) THUR ( ) FRI				
HOURS: FROMTO				
Check the meals you want your child to receive: Breakfast ( ) Lunch ( ) PM Snack ( )or,				
I will provide my child's food ( ) By checking this box I understand that Kids 'R' Kids #42 is not responsible				
for the nutritional value of the food, or if it meets the child's daily food needs.				
A Non-Refundable Registration fee of \$150 (\$250 per family) and \$150 Supply     Initials:			Initials:	
Fee is required upon enrollment and annually thereafter.				
• Tuition is due Friday for the upcoming week. Tuition not paid by Monday be			d by Monday befor	e Initials:
6:25 pm will incur a \$15 late charge.			Initials	
• There are no deductions for holidays, sick days, or p			eek attendance.	Initials: Initials:
I agree to pay the current tuition rate throughout my child's enrollment. Rate is     subject to change.     Ini			Initials:	

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



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D.O.B:

#### CHILD'S FULL NAME:

#### HEALTH AND EMERGENCY PERMISSION

List any ALLERGIES or SPECIAL DIETS your child has or write "NONE":					
Please describe the REACTIONS your child will have if they come in contact with, or ingests the item(s):					
			List any		
	ng illnesses, and hospitaliz	-			
prescribed for long tern	n continuous use, and any	other information we sho	uld be aware of:		
		, give permission fo	r 'Kids 'R' Kids' #42 to seek		
medical attention for m	y child,		_, in the event of an emergency		
-			Kids 'R' Kids International, Inc.,		
		-	acuation becomes necessary. I		
		iges in telephone numbers	s, etc. where I can be reached.		
Child's Physician Inform					
Dr		Phone #:			
Street	C	`ity State Zin:			
Street	······································	, State, Zip			
Kids 'R' Kids #42 Emergency l	Medical Procedure will be:				
1. Administer first Aid	I/CPR				
2. Call 911 if necessar					
	al guardian, or other emergency				
	transport child to the nearest h will be given by the doctor on ca		TX 77584 713-413-5000		
		ENCY CONTACTS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
The persons listed below			ND are AUTHORIZED with proper		
	EMERGENCY CONTACTS N				
	ID AT LEAST 1 MORE PERS				
NAME	RELATIONSHIP	PHONE	ADDRESS		
		HOME/CELL/WORK	Required for all contacts		
	<b>1</b> <sup>ST</sup>				
	PARENT/GUARDIAN				
	2 <sup>ND</sup>				
	PARENT/GUARDIAN				

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



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#### CHILD'S FULL NAME: \_\_\_\_\_

\_ D.O.B: \_\_\_\_/\_\_\_/

#### School Age Children ONLY

My child,	, has a current immunization,	hearing, and vision record of	on file at the
C. H			

following school:

Don Jeter Elementary		Dill Brothers Elementary	
2455 Cr 58 Manvel Tx 77578	281-245-2055	2910 Half Bay Moon Dr Pearland, Tx 77584	281-245-3660
Glenn York Elementary		Mary Marek Elementary	
2720 Kingsley Dr Pearland, Tx 77584	281-245-2100	1947 Kirby Pearland, Tx 77584	281-245-3232
Wilder Elementary		Red Duke Elementary	
2225 Kingsley Dr Pearland, Tx 77584	281-245-3090	2900 Cr 59 Manvel, Tx 77578	281-345-3400
Savannah Lakes Elementary		Pomona Elementary	
5151 Savannah Pkwy Rosharon, Tx 77578	281-245-3214	4480 Kirby Dr. Manvel, TX 77578	281-245-3670

#### **TRANSPORTATION GUIDELINES**

- It is vital that Kids 'R' Kids be notified of any changes in the above scheduled transportation. We will assume that the above schedule will be followed unless we receive different instructions from the parent or guardian. NOTIFY US AS QUICKLY AS POSSIBLE IF YOUR CHILD DOES NOT NEED AFTERNOON TRANSPORTATION. Failure to notify us of any changes causes confusion and delays in our schedule.
   FAILURE TO ADHERE TO THIS POLICY MAY RESULT IN A \$20 CHARGE TO YOUR ACCOUNT.
- In this event that the designated location is unable to receive children, they will be returned to Kids 'R' Kids #42.
- Children will not be left unattended in any vehicle used for transportation.
- Children will wear seat belts.
- YOUR CHILD MUST BE AT THE CENTER NO LATER THAN 7:05 A.M TO BE TRANSPORTED TO THE SCHOOL IN THE MORNINGS. IF YOUR CHILD NEEDS TO BE SERVED BREAKFAST, HE/SHE NEEDS TO BE HERE BY 6:50 A.M.

#### **TRANSPORTATION RULES**

- Always listen to and follow directions of the driver.
- Always walk on the bus with an adult.
- Wait until the bus stops and doors open before you step near the bus.
- Always wear your seat belt and keep the isle clear.
- Always remain seated, facing forward.
- Talk softly, never throw things or fight. The driver can't concentrate if riders are disruptive.
- Keep body parts and all other objects inside the vehicle.
- Don't eat or drink on the bus.
- Students should not mark upon, deface, cut seats, or otherwise cause damage to the bus.
- Never bring pets or insects on the bus without getting permission.
- Wait for the bus to stop before unbuckling your seatbelt or leaving your seat.
- Gather all your belongings; be sure you have left nothing behind.
- If you drop something near the bus, ask an adult to get them for you.

#### Failure to follow the above rules may result in suspension or termination of transportation.



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#### CHILD'S FULL NAME: \_\_\_\_\_

D.O.B: /\_/\_/

#### **Transportation Agreement**

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

#### Kids 'R' Kids #42TX Shadow Creek Ranch 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: Memorial Herman 16100 S. FWY Pearland, Texas, 77584 713-413-6500

I, \_\_\_\_\_\_\_give permission for Kids 'R' Kids #42TX 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 #42TX 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:

I, \_\_\_\_\_

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- In the event the designated location is unable to receive children they will be returned to Kids 'R' Kids #42TX.
- It is vital that Kids 'R' Kids #42 TX be notified of any changes in the above scheduled transportation.
- Kids 'R' Kids #42 TX 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 #42 TX by the earliest possible time before scheduled pickup or drop off.

\_\_\_\_\_\_ agree for my child to be transported by Kids 'R' Kids #42TX

	o school at rom school	at	(am/pm) (am/pm)		
On the following days:	Monday	Tuesday	Wednesday	Thursday	Friday
		Field Trips Emergencie			
ignature-Parent or Legal Guardian:				Date:	



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#### CHILD'S FULL NAME: \_\_\_\_\_

\_ D.O.B: \_\_\_\_/\_\_\_/

#### **INTERNET RELEASE**

Technology has allowed Kids 'R' Kids to give parents the opportunity to monitor their child's classroom through computers, video and the Internet. By enrolling your child in Kids 'R' Kids #42, you agree to allow your child's image to be on the internet.

#### To access this service certain standards must always be maintained:

- Access Codes (issued to those parents wishing to avail themselves of this service) are used to limit
  access to the images of our children but should realize that this system works through the Internet.
  Authorized access permits access by that person to the images of all children within the field of view of
  the camera, including your child, whose image cannot be excluded, even if you chose not to utilize this
  internet service.
- You agree not to (or permit any other person to) divulge, reproduce, print or save, in any way or on any medium, any images, prints or video images of any portion of the Center's premises or any of the Center's children without prior consent of the center. <u>This involves security of the Center and the children should always be observed.</u>
- 3. Unauthorized access to the image of your child could occur as a result of a breach of the Internet or a breach of security by the holders of Access Codes. <u>Although all available measures are taken to prevent</u> <u>any unauthorized access, this is beyond the Center's control, and we do not guarantee against such unauthorized access.</u>
- **4.** You agree that our method of assigning Access Codes and maintaining the confidentiality of such codes, so long as conducted in a manner consistent with usual, ordinary and reasonable business practices, shall be all that is required of the Center in safeguarding your children's video images, and that no other or different safeguards of internet video images of children or the premises shall be expected or required of the center.
- 5. You agree that only those persons, if any, listed below shall be given an Access Code. You agree that it is solely your responsibility to instruct each such person regarding the provisions of this Agreement and to take from each such person their express agreement to:
- a. Not divulge the Access Code to any other person
- b. Abide by all the provisions of this agreement

#### Listed below are persons (first and last names) of whom Access Codes are requested:

A) \_\_\_\_\_B) \_\_\_\_\_C) \_\_\_\_

Your signature below constitutes affirmation of your full and voluntary understanding and acceptance of these conditions with respect to your children, you or express waiver of all the Rights of privacy in connection wherewith, as well as your agreement that you expressly assume all risks involved in furnishing images, and your release of the Center from any and all liability for any damage of any nature arising or resulting from its furnishing of this service, whether negligent or not.

I hereby warrant that I am of full age and competent to contract for the minor named above. I have read the foregoing release and warrant, and I fully understand the content thereof.



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CHILD'S FULL NAME: \_\_\_\_\_

\_\_ D.O.B: \_\_\_\_/\_\_\_/\_\_\_\_/

#### MEDIA RELEASE

I hereby assign and grant to the photographer, or those for whom the photographer is acting as indicated above, the right and permission to copyright and/or use and/or publish, and republish, photographic pictures and portraits of the minor named below in which said minor may be included in whole or in part, in color, or black and white, made through any media, including any social media, by the photographer at his studio or elsewhere, including the use of any printed matter in conjunction with such photographs.

I hereby waive my right to inspect and/or approve the finished photograph or advertising copy or printed matter that may be used in conjunction with such photographs, or to the eventual use that it may be applied.

I hereby release and discharge the above, its assigns, and all persons acting under its permission or authority or those for whom it is acting, from against any liability as a result of any distortion, blurring, alteration, or optical illusion that may occur in the taking of the picture, or processing or reproduction of finished product.

I hereby warrant that I am of full age and competent to contract for the minor named below in so far as the above is concerned. I have read the foregoing release and warrant that I fully understand the contents thereof.

Minor's Name

**Printed Name of Parent** 



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CHILD'S FULL NAME: \_\_\_\_\_ D.O.B: \_\_\_\_/\_\_\_/\_\_\_

#### CHILD'S PROFILE

1. Has your child had previous preschool experience? YES ( ) NO ( )

Explain

2. What would you like most for your child to experience with us?

- 3. Does your child have any fears?
- 4. Does your child play well with other children? **YES ()** NO() NOT SURE()
- 5. List the names and ages of other children in your family.

6. Does your child take a nap? YES ( ) NO ( ) How long?

At Kids 'R' Kids, there is a daily quiet time when children are expected to nap. If they are unable to nap, they will read or work on a quiet activity during that time.

7. What primary language is spoken in your home?

#### PLEASE FILL OUT FOR CHILDREN AGES 2-4

Is your child potty trained? If not, what stage is he/she in?

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



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#### CHILD'S FULL NAME: \_\_\_

\_\_ D.O.B: \_\_\_\_/\_\_\_/

#### POLICIES AND PROCEDURES

- 1. Kids 'R' Kids does not have the right to withhold a child from any parent having custody or joint custody. If there is a current court order stating that one parent does not have access to a child, we must have a copy in the child's file. We cannot deny any parent access to their child without such order. The Center cannot become involved in custody disputes and a child will be disenrolled if such disputes occur.
- 2. I understand that up to a maximum of two weeks of vacation credit may be used after 6 months of enrollment. The front office staff must be notified in writing and in advance that a child will be absent all five consecutive days of a week (Monday-Friday.) Vacation credit is equal to half of the regular tuition and must be paid in advance. Vacation credit weeks cannot be carried over to the next year. Vacation Request Forms are available for you to complete at the front desk, which will be sufficient notification.
- 3. I understand that it is my responsibility to escort my child into and out of the Center, as well as signing my child in and out of the Center. I understand that staff members will escort my child into the center when being transported by the district or Kids 'R' Kids transportation.
- 4. If my child wears diapers, I understand that I am to provide them. Only disposable diapers are permitted in the school.
- 5. I understand that I am totally responsible for any food not on the menu required by my child. This is a peanut free school; no peanut products or traces of peanut products may be in foods brought in. Gum, candy, sodas, and non-traditional foods should not be brought in. If my child's diet consists of breast milk/formula not provided by the school, I understand I will provide the appropriate number of prepared bottles containing the formula/breastmilk necessary for my child each day. Each bottle will be clearly labeled with my child's full name and date prepared.



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#### CHILD'S FULL NAME:

\_ D.O.B: \_\_\_\_/\_\_\_/\_\_\_\_/

- 6. I understand that if my child is ill, including but not limited to a severe cough, or sore throat, undetermined rash or spots, temperature over 100°, severe headaches, upset stomach, pink eyes or diarrhea, he/she cannot be accepted into the center until well. Children must be fever free for 24 hours (without fever reducing medications) before returning to the school. In the event my child has a communicable disease, a release from a medical source may be required before my child reenters the school. Kids 'R' Kids will notify me if a reportable disease has been introduced into the school.
- 7. I understand that the center has a specific policy regarding the administration of the medication. I agree to provide the center with all the required information in accordance with this policy. The school reserves the right to administer medicines only as prescribed by a licensed physician including over the counter drugs. Medications must be in original containers. Medication is administered at 10:30 AM and 2:30 PM.
- **8.** I understand it is my responsibility to keep the school advised of changes of the address, phone numbers, and contacts.
- **9.** I understand the school closes at 6:30 pm and my child must be picked up by that time. A base late fee of \$35 plus \$1 per minute, after a 5-minute grace period per child, will be charged after 6:30 pm. If I have not picked up my child by 7:00 pm and all attempts to contact me and all my emergency contacts fail, Kids 'R' Kids is obligated to call Family Protective Services and law enforcements.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS. I HAVE RECEIVED AND AGREE TO ABIDE BY ALL POLICIES AND PROCEDURES OF KIDS 'R' KIDS #42 AS OUTLINED IN THIS AGREEMENT AND THE SCHOOL HANDBOOK WHICH IS AVAILABLE ON OUR WEBSITE OR BY REQUESTING ONE AT THE FRONT DESK. I ALSO UNDERSTAND THAT THE SCHOOL HANDBOOK IS AN ALL-INCLUSIVE LIST OF CHILDCARE REGULATIONS AND THAT I MAY VIEW THE STATE LICENSING STANDARDS AT ANY TIME.



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#### CHILD'S FULL NAME: \_\_\_\_\_

\_ D.O.B: \_\_\_\_/\_\_\_/\_\_\_\_

#### **HEALTH INFORMATION & IMMUNIZATION REQUEST**

\*I UNDERSTAND THAT KIDS 'R' KIDS IS REQUIRED TO HAVE A COPY OF MY CHILD'S UPDATED SHOT RECORDS WITH THE PEDITRICIAN'S SIGNATURE OR STAMP. SHOT RECORDS ARE REQUIRED BEFORE YOUR CHILD CAN START CARE.

\*A STATEMENT OF HEALTH SIGNED & STAMPED BY YOUR CHILDS PHYSICIAN IS ALSO REQUIRED BEFORE YOUR CHILD CAN START CARE

PARENT PERMISSION: I \_\_\_\_\_\_, hereby authorize KIDS 'R' KIDS OF SHADOW CREEK RANCH to request medical information for my child \_\_\_\_\_\_, D.O.B: \_\_\_\_/\_\_\_\_ that is enrolling with KIDS 'R' KIDS OF SHADOW CREEK RANCH.

My child has been examined within the past year by a health professional and is able to participate in the childcare program. Before or on the Orientation Day, I will obtain a health care professional's signed statement and will submit it to Kids 'R' Kids #42, TX.

Parent/Guardian Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_\_ I UNDERSTAND THAT KIDS 'R' KIDS IS REQUIRED TO HAVE A COPY OF MY CHILD'S UPDATED SHOT RECORDS WITH THE PEDITRICIAN'S SIGNATURE OR STAMP. SHOT RECORDS ARE REQUIRED BEFORE YOUR CHILD CAN START CARE.

A copy must be turned in with this enrollment package. I also understand that if my child's shot records are not up to date, I will be sure my child receives the appropriate immunizations within the timeframe set by Kids 'R' Kids.

#### **DOCTOR'S STATEMENT**

The following child: past year and it has been found that the above child is physically <u>OF SHADOW CREEK RANCH</u> and is in good health.	
Doctor's Name:	
Office Number:	
Office Fax Number:	
Office Name:	
Doctor's Stamp & Signature:	
Date:	
Signature-Parent or Legal Guardian:	Date:



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

This form provides the required information per 26 Texas Administrative Code (TAC) minimum standards Sections 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 self-direction, which include at least the following:

- 1) using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
- 2) 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;
- 3) grabbing or pulling a child;
- 4) putting anything in or on a child's mouth;
- 5) humiliating, ridiculing, rejecting or yelling at a child;
- 6) subjecting a child to harsh, abusive or profane language;
- 7) placing a child in a locked or dark room, bathroom or closet;
- 8) placing a child in a restrictive device for time out;
- 9) withholding active play or keeping a child inside as a consequence for behavior, unless the child is exhibiting behavior during active play that requires a brief supervised separation or time out that is consistent with 746.2803(4)(D); and
- 10) 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;
    - (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 Section 261.001 and TAC Chapter 745, Subchapter K, Division 5, of this title (relating to Abuse and Neglect).

#### Signature

This policy is effective on the following date:

Signed by:

Role: O Parent O Caregiver or Employee

O Household Member (CH. 747 only)

#### Minimum Standards Related to Discipline

• Title 26, Chapter 746 Subchapter L: <u>http://texreg.sos.state.tx.us/public/readtac\$ext.ViewTAC?tac\_view=5&ti=26&pt=1&ch=746&sch=L&rl=Y</u>

• Title 26, Chapter 747 Subchapter L: <u>http://texreg.sos.state.tx.us/public/readtac\$ext.ViewTAC?tac\_view=5&ti=26&pt=1&ch=747&sch=L&rl=Y</u>

• Title 26, Chapter 744 Subchapter G: <u>http://texreg.sos.state.tx.us/public/readtac\$ext.ViewTAC?tac\_view=5&ti=26&pt=1&ch=744&sch=G&rl=Y</u>

# Kids R Kids of Shadow Creek Ranch Biting Policy

We all understand and accept that when toddlers are in groups, biting is unfortunately not unexpected. We know and accept that toddlers bite for many different reasons, however, we believe that biting is never the right thing to do. Our goal is to help children who are bitten feel better by giving them care, support, and advice on handling themselves in a threatening situation. As well as teach the children who bite more appropriate behaviors. The safety of the children at Kids R Kids of Shadow Creek Ranch is our primary concern. We understand that our caregiving environment and practices can influence biting, and we take responsibility for ensuring they are appropriate for toddlers. Our biting policy addresses the actions the staff will take if a biting incident occurs and the consequences if the issue is not resolved.

# The following steps will be taken if a biting incident occurs at Kids R Kids of Shadow Creek Ranch

- The biting will be interrupted with a firm, "No...we don't bite people!"
- Staff will stay calm and will not overreact.
- The bitten child will be comforted.
- Staff will remove the biter from the situation. The biter will be given something to do that is satisfying.
- The wound will be assessed by the teacher and cleansed with soap and water.
- The child who bit will be spoken to on their level in a loving, but firm manner. We will explain that, "You cannot bite your friends because it hurts them. We do not hurt our friends."
- The parents of both children will be notified of the biting incident. Appropriate forms will be filled out (Incident Report).

### When your child has bitten another:

Classroom staff will work together with parents and try to reach the cause as to deter future biting – charting location, who was involved, time, other behaviors, staff present, and circumstances. Staff will "shadow" children who

indicate a tendency to bite, to head off biting situations and reinforce appropriate behavior.

- You will be notified of the biting incident and will be expected to begin your own research and assist us in training your child to use appropriate behavior.
- 2. After second biting incident, the Director will meet with parents to go over a written behavior improvement plan and offer resources for assistance. They will discuss our biting policy and prepare them for the possibility of dismissal. We will work closely with the child, in hopes to guide them quickly past the stage.
- 3. After multiple biting incidents, (3 or more) the student may be unenrolled from our program if deemed in the best interest of the child, Kids R Kids, and the other children. Re-enrollment for the child into Kids R Kids of Shadow Creek Ranch may be considered six months after the termination.

# **Parenting Resource**

Toddlers and Biting: Finding the Right Response

https://www.zerotothree.org/resources/232-toddlers-and-biting-finding-theright-response

Parent Printed Name

Child's Printed Name and Suite #

Parent Signature & Date signed

## New Family Orientation Policy

A New Family Orientation benefits both guardians and students by providing with a structured introduction to our school, allowing families to learn about campus facilities, academic programs, student life resources, meet classmates, and feel more comfortable navigating their new environment before the start of classes, ultimately aiding in a smoother transition and fostering a sense of belonging. For this purpose, Kids R Kids 42 TX requires at least one of the legal guardians to attend a mandatory orientation before starting.

We understand that situation happens. Therefore, we allow up to three times rescheduling requests for any rational reasons. Any family who fails to attend the orientation after three-time rescheduling may result in immediate termination of service.

Our mission is to provide the ultimate care and education to every family.

We appreciate all your cooperation and understanding.

Name(Print):

Signature:

Date:

\*Kids R Kids 42 TX reserves the right to make any changes without prior written notice.

# Acknowledgement and Receipt of Family Handbook

The registration of a child is considered an acceptance, on his/her part and on the part of his/her families or guardians, of the terms and conditions of the Family Handbook and all of our School's rules and regulations, including the School's judgment on disciplinary sanctions or dismissal of a child.

The rules and regulations contained in this Handbook are not meant to be comprehensive. Rather, they presuppose the good will and judgment of a child in all circumstances in which he/she may find himself/herself and are subject to the School's ultimate discretion, judgment and interpretation.

Children and families or guardians are asked to familiarize themselves with all of the information contained in this Family Handbook and to sign this form.

We have read, understood and agree to abide by and honor all statements and provisions set forth in the Family Handbook or as they may be changed from time to time by the School.

Child

Age

Date

Family Member or Guardian

Relationship

Date

(School File Copy)