



ENROLLMENT APPLICATION

Part A: Child Information

Last Name: _____

Doctor: _____

First Name: _____

Doctor Address: _____

Birth Date: _____

Doctor Phone: _____

Address: _____

City: _____ Postal Code: _____

Part B: Parent/Guardian Information

Name: _____

Name: _____

Relationship to child: _____

Relationship to child: _____

Address: Same as child or

Address: Same as child or

Address: _____

Address: _____

City: _____ Postal Code: _____

City: _____ Postal Code: _____

Phone: _____

Phone: _____

Cell: _____

Cell: _____

Email address: _____

Email address: _____

Employer Name: _____

Employer Name: _____

Employer Address: _____

Employer Address: _____

Employer Phone: _____

Employer Phone: _____

Part C: Emergency Contact Information

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Part D - Medical Information

Health Card Number: _____ Expiry: _____

List all health concerns, allergies, food restrictions, and **provide a copy of immunization records**. Please attach a separate sheet if necessary.

_____ EPIPEN _____
 _____ PUFFER _____

Part E - Care Request

Full Time Part-Time: Mon. Tues. Wed. Thurs. Fri.

Program: _____

Part F - Parent/Guardian Signature

_____ Parent/Guardian Signature

_____ Date

INTERNAL USE ONLY		
Admission Date:	Withdrawal Date:	Fee Details:
Reason For withdrawal:		
<input type="checkbox"/> Full Time <input type="checkbox"/> Part-Time: <input type="checkbox"/> Mon. <input type="checkbox"/> Tues. <input type="checkbox"/> Wed. <input type="checkbox"/> Thurs. <input type="checkbox"/> Fri. Program: _____		



AUTHORIZATION TO RELEASE

Your child will only be released to an authorized person listed on this form (parent, guardian, or authorized pick-up contact). In case of an emergency or unforeseen circumstance please indicate the name, address and phone number of any person (other than the parent/guardian) who is authorized to pick up your child on your behalf.

Picture ID will be needed to verify the identity of the person to whom your child will be released.

Name of Child

First Name: _____

Last Name: _____

Parent/Guardian

First & Last Names: _____

First & Last Names: _____

Relationship to child: _____

Relationship to child: _____

Who is Authorized to Pick-up Child?

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Special Instructions



PARENTAL CONSENT

Child's Name: _____

- If, at any time, medical treatment, including anesthetic, is required, due to circumstances such as accident, sudden illness, or emergency it may be given by a private physician or hospital. The parents will be contacted first, except in an emergency situation where 911 will be called first and then the parents.
- I hereby consent to allow my child to leave the premises of MAELC to participate on excursions within walking distance of the Day Care Centre. I understand that my child will be escorted and supervised by the staff of the MAELC
- I understand that this is only for local walks and any field trips will be covered by a separate form, which will be signed at the time of the trip and payment of any necessary fees.
- I hereby give permission for my child to use all the play equipment and participate in all activities at the MAELC.
- I hereby give permission for my child to be included in any photographs, videos, etc. that may be taken at any time. I understand that I will be notified, as they occur, of who is taking them and why they are being taken.
- I hereby give permission for my child to be included in any photographs to be posted on the Centre's website.

Parent/Guardian Signature

Date

Signature of Witness

Date



TOPICAL APPLICATION CONSENT

Child's Name: _____

I _____, give permission to the MAELC staff to applying the following items on my child.

- Sun Block
- Bug Repellent (Outdoors)
- Lip Ointments
- Diaper Ointments
- Other

Parent/Guardian Signature

Date



IMAGE CONSENT

For part of learning at our centre, photographs/videos will be taken to document our discoveries and experiences of the children. In order to protect the rights and privacy of the children at our centre, we need permission from the parent or legal guardian to take pictures/videos of their child while attending MAELC.

I, _____, the parent/caregiver of _____, give full permission for the staff at the MAELC to take photographs/videos of my child while under the care at our program.

I, _____, also give permission for the staff at the MAELC to use these pictures/video for promotional purposes outside the program premises. (Such as newsletter, newspaper, Facebook, etc.)

Parent/Guardian Signature

Date

Director Signature

Date



PARENT HANDBOOK POLICY AGREEMENT

I _____ have read and fully understand the policies outlined in the above parent handbook.

I take full responsibility for adhering to the above mentioned policies.

Parent/ Guardian Signature

Print Name

Date

Parent/ Guardian Signature

Print Name

Date



BEHAVIOUR GUIDANCE POLICY

The Munro Academy Early Learning Centre (MAELC) behavior guidance policy is based on the regulations outlined by the Department of Education and Early Childhood Development. Available at:

<https://novascotia.ca/just/regulations/regs/elcc.htm>

Our goal at MAELC is to help children learn to manage their emotions and actions by communicating and problem solving. In addition, we use the following proactive behavior guidance strategies to foster positive prosocial and conflict resolution skills.

1. Provide children with positive reinforcement
2. Role model positive and respectful communication and behavior
3. Provide children with sufficient stimulating and challenging activities
4. Set clear, predictable, and consistent boundaries and classroom rules
5. Set appropriate expectations for each child's developmental level
6. Prepare children for transition times
7. Provide ample opportunities for children to independently make their own choices and to facilitate program solving (e.g. acceptable alternatives)
8. Listen to children disclosing their feelings to determine the cause of their behavior and assist in determining a better solution
9. Promote effective communication between children
10. Help children to develop self control

If an undesired behavior persists, a teacher will redirect the child to a different stimulating activity where appropriate behavior can be achieved, then the teacher will provide positive reinforcement for the appropriate behavior.

According to the Nova Scotia Day Care Act and Regulations, no operator shall (under and circumstances):

- A. Permit corporal punishment, including but not limited to
 - I. Striking a child directly or with any physical object
 - II. shaking , shoving, spanking, or any other forms of aggressive physical conduct.
- B. Require or force a child to repeat physical movements
- C. use harsh, humiliating, belittling, or degrading responses of any form, including verbal, emotional or physical
- D. Confine or isolate a child
- E. Deprive a child of basic needs including food, shelter, clothing, or bedding

This legislation applies to everyone making contact with the children while attending MAELC. As per the provincial regulations, in the event that a child exhibits behaviors such as hitting, self harm or harm of others, throwing objects, ect., which may impact the health and safety of the child, their peers, or staff. Interventions beyond those typically practiced in child care facilities may be implemented. To determine if such practices are necessary and more clearly defined. The children team, including guardians will meet and collaborate to create a **behavior guidance plan**. The plan will define how to support the child through difficult situations when the typical behavior strategies are not effective. All parties on the team must be given the opportunity for input and agree to the plan. The plan will be kept in the child's file until such times as completing revisions and/or the child leaves the child care Facility.

This behavior guidance policy will be reviewed with staff and volunteers at the time of hire and with families when registering with the centre. The behavior guidance policy is followed at all times. It will be reviewed on an annual basis (and more if needed) with staff and kept in personnel files.

In addition, the MAELC will follow the Provincial Standards for Food and Nutrition

https://www.novascotia.ca/coms/families/provider/documents/manual-food_and_nutrition.pdf

- I. staff , volunteers, and care providers do not offer food to reinforce positive behaviors.
- II. staff , volunteers, and care providers do not without food consequently for inappropriate behavior.
- III. Food is not used as a reward for completing a task or finishing a meal (e.g. dessert will not be withheld if the child does not finish the main meal).

When a child team (which may include staff, external professionals and the children's guardians)has determined that food is the most appropriate and natural way to reinforce desired behaviors and support the child's development, then a routine-based plan (RBP) must be developed for the child. The RBP must include a plan for replacing and/or reducing the use of food as a motivator.

I have read and been trained on the above Behaviour Guidance Policy and I Agree to abide by the positive practice procedures in it. I also understand the policy will be reviewed annually.

Parent/ Guardian Signature

Print Name

Date

Parent/ Guardian Signature

Print Name

Date