

# CREATIVE CLOUDS

## Family Day Care





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### General Information

Parent's Name:			
Address:			
City, State, Zip:			
Home #:		Work or Cell #:	

Child Name:			
Age:		Birth Date:	

I, \_\_\_\_\_, have met with Anmol Yousef, and she explained fully the policies of "Creative Clouds Family Daycare", I understand the policies and I also understand my child has been admitted into: "Creative Clouds Family Daycare" without regard to: Race, Religion, Nationality, or sex and I additionally agree the following policies:



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### I. DAYCARE POLICY

1. I understand the “Creative Clouds Family Daycare” is open Monday – Friday.
2. I understand the “Creative Clouds Family Daycare” is open 7:00am – 6:00pm.
3. I agree to submit ALL emergency as well as medical emergency cards the first day my child attends “Creative Clouds Family Daycare”.
4. I agree to submit my child’s Health Form on the FIRST day of attendance.
5. I agree to escort my child the “Daycare Front Entrance”.
6. I agree to NEVER pick up my child & leave the “Daycare grounds” without speaking to member of the “Daycare staff”.
7. I agree to NEVER pick up my child & leave the “Daycare grounds” without notifying one of the “Daycare staff” first.
8. I understand that the sniffles are catching & agree NOT to send my child to Daycare if he/she is ill.

(Below are our exclusion criteria.)

- a. If a child (or staff member) has signs or symptoms of anything contagious, they must receive the appropriate treatment and wait 72 hours, or be cleared by a medical professional, before returning to the daycare.
- b. An illness that prevents the child from participating in activities.
- c. An illness resulting in a greater need for care that the childcare staff can provide.
- d. Fever, accompanied by behavioral changes or other signs of illness. \*Fever is defined as an elevation in body temperature. Oral temperature above 101 degrees F, rectal temperature above 102 degrees F, or auxiliary (armpit) temperatures above 100 degrees F are considered above normal in children.



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9. If my child becomes ill while at Daycare, I agree to pick him/her up from class within one (1) hour after I have been notified.
10. I agree to notify “Creative Clouds Family Daycare” in writing, if anyone other than legal guardian will be picking up my child from Daycare.
11. I agree to notify “Creative Clouds Family Daycare” of any changes in my child’s home environment.
12. I agree to read ALL notices sent home from “Creative Clouds Family Daycare”.
13. I agree to provide a letter of consent or a physician’s note giving “Creative Clouds Family Daycare” permission to administer over the counter drugs or prescription drugs to my child. This is in accordance with N.Y.S. regulations. (Refer to “Creative Clouds Family Daycare” Health Care Plan.)
14. I agree I will ascertain **that all toys I send with my child to “Creative Clouds Family Daycare” are considered child and infant safe.** (i.e. No sharp edges and/or removable parts that can cause a choking hazard.)
15. I agree to follow “Creative Clouds Family Daycare’s” emergency procedure if I cannot pickup my child from the Daycare and could not notify the Daycare staff in writing.
16. I agree to conduct myself appropriately with other parents and Daycare staff at all times. I am aware that “Creative Clouds Family Daycare” has a **zero-tolerance policy towards inappropriate behavior**, especially in front of the children. This includes cursing, using slurs, yelling, or any other aggressive or offensive behavior. Any offence can result in immediate contract termination and I will be responsible for the final two (2) weeks of payment required.



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## II. EMERGENCY PROCEDURES

1. It is **MANDATORY** that “Creative Clouds Family Daycare” has at least one reliable emergency contact phone number in case there is an emergency involving my child. I give “Creative Clouds Family Daycare” and/or the following people permission to seek:

Name:		Phone #:	
Name:		Phone #:	

Doctor's Name:		Phone #:	
Insurance:		Phone #:	

2. If someone other than a legal guardian will be picking up my child from “Creative Clouds Family Daycare” and I am unable to provide a note, I agree to follow the following procedure: “Creative Clouds Family Daycare” is aware that emergencies occur. Please give us a “Code Word” that is only known between you, your spouse and our Daycare...then the following procedure if/when necessary:

- Call the Daycare
- State the Code Word
- State the name of the person picking up your child / identify car.
- Person will be asked to present a picture ID if they are unknown to the Daycare staff.



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### III. TUITION POLICY

1. I understand there will be \$10.00 charge for the first 15 minutes, and a \$1.00 per minute charge after that if I pick up my child later than the 6:00pm closing time. I further understand that I will NOT bring my child to the Daycare prior to 7:00am.
2. I understand that I am responsible for payment whether my child is present or absent due to illness, vacation, or any other unforeseen schedule changes. I realize that the Daycare has only so many vacancies available to offer and I am paying for one of them.
3. I understand that Tuition is due on (unless a Holiday). A late fee of \$35 will incur if tuition is not paid on time, or if checks are returned due to insufficient funds.
4. We follow Wappinger Central School District Closings. I understand that the following are chargeable Holidays and the Daycare will be closed:
  - New Year's Eve
  - New Year's Day
  - Martin Luther King Day
  - President's Day
  - Good Friday
  - \*Memorial Day Weekend
  - Juneteenth
  - \*July 4<sup>th</sup>
  - \*Labor Day Weekend
  - Columbus Day
  - Election Day
  - Veteran's Day
  - Thanksgiving Weekend
  - Christmas (December 24-26)
  - Rosh Hashanah
  - Yom Kippur
  - Easter Weekend





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\*Memorial Day and Labor Day are closed for four-day weekends. For all other holidays that land on a Friday, Monday, or weekend day (including Christmas), that Friday and Monday attached to the weekend will also be closed, making it a four-day weekend.



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### Parents/Guardians Permission to Apply Sunscreen to Child



Name of Child \_\_\_\_\_

I understand that I must provide the sunscreen to “Creative Clouds Family Daycare”.

Sunscreen must be in a zip-lock bag with my child’s name clearly marked on it.

I give permission to the staff of “Creative Clouds Family Daycare” to apply sunscreen to my child as needed. I understand that sunscreen may be applied to exposed skin including but not limited to the face, top of ears, nose, arms, and bare shoulders.

Please check one of the following

\_\_\_\_\_ I have provided “Creative Clouds Family Daycare” with sunscreen with a minimum of 30 SPF.

\_\_\_\_\_ I have NOT provided sunscreen for my child’s use. I understand the inherited risks with my child not having sunscreen applied to them.

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Date**





# CREATIVE CLOUDS

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### MY RESPONSIBILITY AS A PARENT

Return Emergency Blue Card information – update information as needed Medical Forms must be completed by your child’s physician prior to admission – forms must be updated yearly and/or as new immunizations are received.

All supplies must be labeled with child’s full name

If your child is in diapers, please provide them with a supply – teachers will notify you if your supply is running low.

If your child is not fully potty trained 3 packs of wipes are required at the beginning of each month. If your child is required to use special wipes, please provide and label with full name fully understand and commit to the medical policy set in place.

Emergency evacuation spot (far right of the parking lot).

Topical ointment will only be applied if a completed permission slip is filled out (diaper creams/sunscreen).

Lunch will be provided from home each day. We are nut-free so please do not bring lunch or snacks that contain nut ingredients.

Parents are to resume responsibility for supervision of children once they leave “Creative Clouds Family Daycare” Facility. All children are accepted into “Creative Clouds Family Daycare” on a trial basis. The director will meet with the child’s teacher after their first week to assure that this is the best program for your child, and we meet their needs. If the program does not suit the child or if the child’s enrollment is terminated for safety reasons including behavior or harm to others, notification will be given as follows...

The Director will have the right to terminate the contract at any time and give the parents a written notification of 1 week to find alternative childcare.

If you have any questions regarding your responsibilities, please feel free to contact

The Office. Phone # 914-640-0105

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_



# SLEEPING INFORMATION

## Sleeping Arrangements & Instruction for Nap Times



Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

This agreement is between \_\_\_\_\_ and \_\_\_\_\_  
(Parent's name) (Provider's name)

Concerning sleeping instructions for my child \_\_\_\_\_  
(name of child)

1. The following bedding will be used for napping/bedding:

☐ COT ☐ BED ☐ MAT ☐ CRIB ☐ PLAYPEN

☐ OTHER: \_\_\_\_\_

2. Bedding will be supplied by the: ☐ Parent/Guardian ☐ Provider

And will be laundered at least weekly and/or when soiled by:

☐ Parent/Guardian ☐ Provider

3. The child will nap/sleep in the following areas of the home:

\_\_\_\_\_  
\_\_\_\_\_

4. The child will sleep for approximately \_\_\_\_\_  
(Approximate time – varies with every child)

5. Supervision of child (please check all that apply):

☐ The child may nap/sleep in a room where an adult is not present. My child will be monitored with a baby monitor once the child is sleeping. Until my child is sleeping, the provider will remain in the same room as the child. The provider must physically check on my every 15 minutes. In the rooms where the children sleep, I understand that the doors are to remain open at all times per regulations.



# SUNSCREEN AUTHORIZATION



## Children's Sunscreen, Bug Spray, And/or Diaper Cream Instructions

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I, \_\_\_\_\_, give "Creative Clouds Family Daycare" and their staff permission to  
(Parent's name)

apply sunscreen, diaper creams, and/or bug sprays as needed to \_\_\_\_\_  
(Child's name)

I will be providing: ☐ SUNSCREEN ☐ BUG SPRAY ☐ DIAPER CREAM

### SPECIAL INSTRUCTIONS:

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### ADDITIONAL INFORMATION:

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Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Daycare Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# PHOTO RELEASE AND CONSENT



## Authorization to Use Photos/Videos For Promotions & Advertising

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Dear Parents & Guardians:

We take photos (and occasionally video) of your child, along with the rest of the children at the daycare, to document activities and events and to provide you, the parent, with images via email or text. Occasionally we may use these photographs and video files for "Creative Clouds Family Daycare" promotional activities, print and web advertisements, on social media, and our website.

Please review your options below regarding the use of your child's photo video image. Select the appropriate box below to provide or not provide your consent for the use of these images. Your opting in is not required, but would be valued greatly as it helps "Creative Clouds Family Daycare" communicate to other parent's the value of our services.

☐ I give my permission to "Creative Clouds Family Daycare" to use photographs and/or video of my child for promotional or advertising activities or on social media or on the daycare's website.

I do NOT want to "Creative Clouds Family Daycare" to use photographs and/or video of my child for promotional or advertising activities or on social media or on the daycare's website.

Parent/ Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Daycare Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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### PRE SCHOOL PROGRAM



Name: \_\_\_\_\_

☐

Know ABC's, Letter Recognition

☐

Practice Writing Letters

☐

Say Numbers, recognize 1 – 20, Count Objects

☐

Know and Identify Colors and Shapes

☐

Identify Patterns, Create Patterns

☐

Identify Big, Bigger, Biggest

☐

Know / Identify Body Parts

☐

Use Pencils, Crayons, Markers, Glue, Paint Brushes, and Scissors

☐

Listen to Stories, Recognize Sight Words

☐

Sing Songs, Dance

☐

Write First Name, Practice Phone Number and Address

☐

Socialize with Children, Play Nice, and Share



# TOY SAFETY NOTICE

## Rules for Bringing Toys To The Daycare from Home



Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

To all of our Parents & Guardians,

This past year we have loved all of the items the children have brought for Show & Tell. It makes us happy to see how creative all our children can be. As a friendly reminder we just want to reiterate that all items brought to the daycare must be child friendly. Some items that are inappropriate for Show & Tell are makeup, beads, arts and craft supplies, slime, money, food, and other items that can be choking hazards or poisonous if swallowed. Some examples of Show & Tell items we encourage are stuffed animals, books, blocks, balls, and stuff from nature, big toys, hats, and drawings. Also we ask that sentimental and/or irreplaceable items are not brought into the daycare, even though we try to keep track of everything we can't guarantee items won't get lost or damaged on accident by another child.

Thank you again for your continued participation in our calendar activities!

Sincerely,

Creative Clouds Family Daycare

Parent / Legal Guardian Signature: \_\_\_\_\_

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





# SNOW DAY CLOSURE NOTICE



## Winter Weather Storm Delays or Closures

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

To all of our Parents & Guardians,

As we are now in the winter season and have had our first heavy snowfall, we want to make sure all parents/guardians are aware of our snow closure policy. In the event that there are 6 inches or more of snow, we will be on a two-hour delay. Depending on the severity of the storm, we may need to close for the day. We will need time to clear the driveway/entrance, outdoor walkways, etc. This is to protect and ensure the safety of all of the children, their parents or guardians, and all other visitors of the Creative Clouds Family Daycare property. We know this may cause an inconvenience but as the winter weather can cause certain dangerous conditions outside, we want to make sure everyone is safe and prevent any unnecessary accidents.

Thank you

Creative Clouds Family Daycare

Parent / Legal Guardian Signature: \_\_\_\_\_

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



## FOOD ALLERGY NOTICE



**Please Keep in Mind We  
Have A SHELLFISH FREE Daycare**

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

To all of our Parents & Guardians,

Please be aware that one of our daycare children has a very serious shellfish allergy. We ask that all parents refrain from sending their child into the daycare with any kind of shellfish in their food to prevent any exposure. This includes shrimp, crayfish, crab, and lobster. Shellfish allergies can cause; hives, itching, swelling of the lips, face, tongue and throat, nausea, vomiting, dizziness, and trouble breathing, as well as anaphylaxis.

Thank you again you all for your cooperation and consideration in our children's safety!

Sincerely,

Creative Clouds Family Daycare Staff

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent / Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## ITEM LABELING NOTICE

**Please Label All Belongings  
Of Each Child with Their Name!**



To all of our Parents & Guardians,

It has come to our attention that many of our parents are bringing their children without labeled cups, bottles, and various other belongings. Please make sure everything is labeled to prevent mix-ups and to stop the spread of germs. Many children have the same exact belongings and it is very easy for the child or provider to get confused. This is for the safety of everyone enrolled in our program. If you don't own any labels, a piece of tape or magic marker would be very much appreciated! If you have already been labeling your children's possessions, please continue to do so and thank you for your cooperation.

Thank you again for your continued participation in our calendar activities!

Sincerely,

Creative Clouds Family Daycare Staff

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent / Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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### TOPICAL OINTMENT PERMISSION

I, \_\_\_\_\_ give Creative Clouds Family Daycare  
permission to apply the supplied ointment to my child \_\_\_\_\_ as  
needed.

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



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### POLICY AND GUIDELINES

#### **Supervision of Children**

The teacher child ratio will always be followed as per OCFS rules and regulation. The children will never be left unattended at any time. Children will be released to the contract holder only, unless prior written authorization and identification are both established.

#### **Nutrition**

All meals will be provided by the parents. Children will be encouraged to feed themselves when age is appropriate. Extra snacks will be provided if the child does not have enough or any.

Each day a daily health check will be conducted. Signs of illness, injury, abuse, or maltreatment will be identified and documented. Creative Clouds Family Daycare staff will inform the parents if their child is injured while in our care. Parents will receive a written report of the incident with details of how, when, and what treatment was administered.

#### **Program**

A written programming plan of activities will always be available for parents. The schedule is made flexible to meet the needs of all the children. Plans will include playtime, meals, nap/rest time, learning activities and outdoor time. The program will promote education, social, emotional, and recreational activities.

#### **Medical Policy**

Children may not attend Creative Clouds Family Daycare if a child develops a temperature of 101 degrees Fahrenheit rectally 100 degrees Fahrenheit under arm, unless a written note from the physician states that the child may attend daycare (along with a diagnosis) and approval to return. Children that have 3 or more persistent episodes of diarrhea within a 24-hour period will not be able to attend until it has ended, or child has returned to normal pattern. Children that have 1 or more episodes of vomiting will not be able to attend until it has ended. Unknown rashes (except diaper rash) or contagious skin rash (impetigo, ring worm, and head lice) are not permitted into Daycare until fully treated. Parents will need to review medical policy and sign a section on contract saying that you are full aware and understand the medical policy.

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



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### HEALTH CARE PLAN

**Health Care Plan Facility ID # 401497**

#### **Child Health and Immunizations**

The program will care for well children ages 18 months to 12 years of age. Children who exhibit any of the following symptoms cannot attend the program:

Diarrhea (3 or more watery stools or one bloody stool within 24 hours.)

Suspected communicable infections (Child may return after starting antibiotics or treatment.)

Fever is defined as a temperature of 101 degrees Fahrenheit or higher (this will be taken in the ear).

Stomachache without vomiting or diarrhea after a recent injury.

\*A severe stomachache that causes the child to double up and scream in pain.

Not urinating at least once in an 8-hour period, dry mouth, no tears.

When a Child becomes ill while in our care, the parents will be notified:

Description of illness

Date and time of illness

Child will rest in office and kept as comfortable as possible. A designated staff member will remain with the child and attend to all needs until the child is picked up.

Staff continues to check if symptoms change and promptly document findings.

Immunizations

Creative Clouds Family Daycare will be following section PHL Section 216% which requires students to be adequately immunized against diphtheria, tetanus, pertussis, polio, measles, mumps, rubella, Hepatitis B, varicella, and Hemophilic against influenza type b pneumococcal.

Parents will be notified in writing as physical and Immunizations are due (1 month notice will be given prior to due date)

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