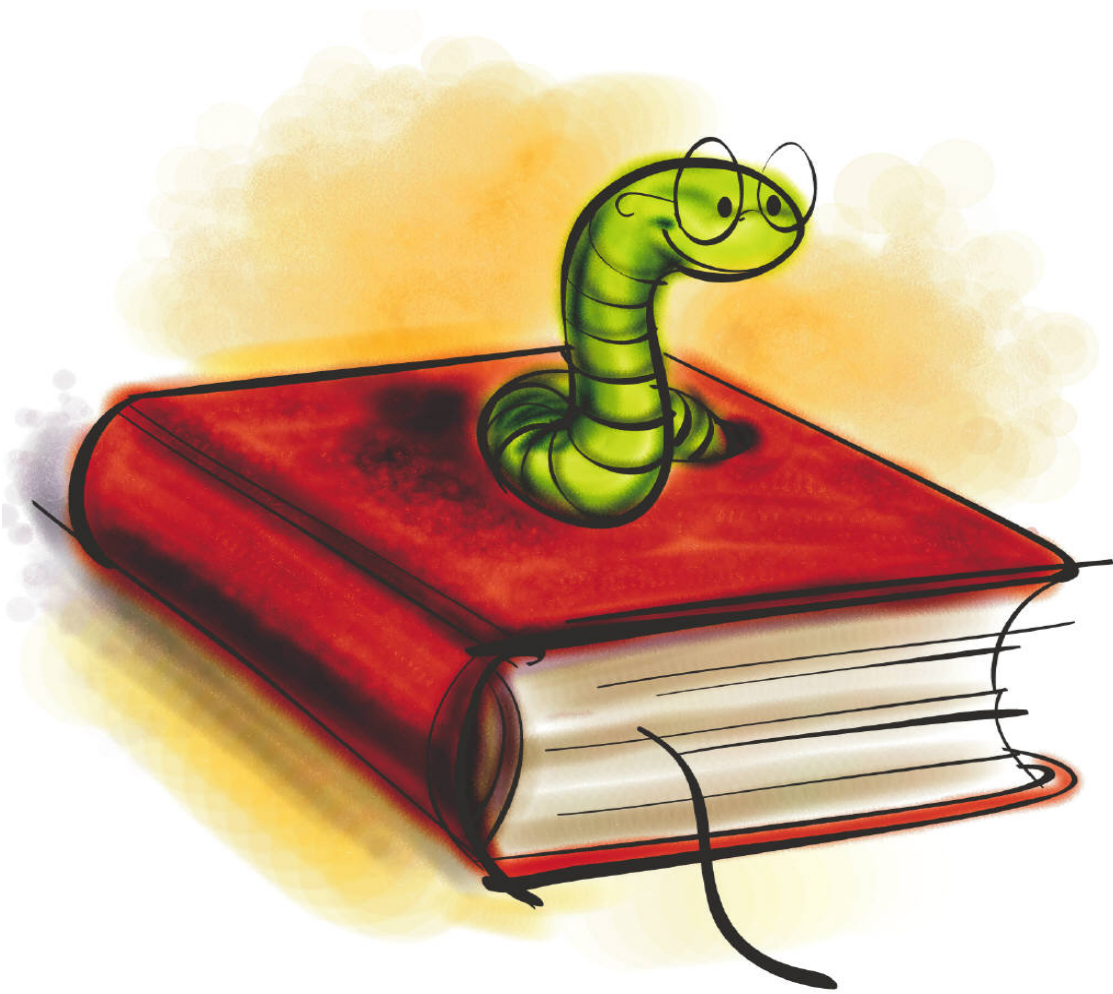


McCreary County Museum



Learning center

Learning Center Enrollment Application

Enrollment Date: _____

Child's Name: _____ **Preferred Name:** _____

DOB: _____ **Gender:** _____ **Current Age:** _____

Address: _____

Mother's Name: _____

Mothers Work Phone Number: _____ **Mothers Cell :** _____

Father's Name: _____

Fathers Work Phone Number: _____ **Fathers Cell:** _____

Home Phone Number: _____ **Alt.Phone:** _____

1. Emergency Contact Name and Phone: _____

Persons Authorized to Pick Up Child (Photo ID Required at Pickup):

1. Name: _____ **Relationship:** _____

Phone: _____ **Driver's License No.:** _____

2. Name: _____ **Relationship:** _____

Phone: _____ **Driver's License No.:** _____

3. Name: _____ **Relationship:** _____

Phone: _____ **Driver's License No.:** _____

- *I understand that my child(ren) will not be released to any person(s) not listed on this form.
- * I understand that it is my responsibility to notify each person listed above that a picture I.D. is required to pick up a child.
- * I understand that it is also my responsibility to inform person(s) picking up my child that they are to be on time to pick up the child by 6:00p.m., otherwise a late penalty will be added to my weekly bill.

Family Dr.: _____ **Phone:** _____

Signature of Parent	Phone	Date
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Learning Center Permission Form

By signing below, I as the parent of a child enrolled at The Learning Center, hereby release The Learning Center Staff and all volunteers of any and all liability regarding the participation of my child in this program, including injuries, damages and/or losses resulting in the participation of Learning Center activities

I have read and understand the rules and guidelines for this program, including dress code and behavior. I also understand that if my child's behavior becomes a problem, he/she will not be allowed further participation.

I give permission for my child to participate in all activities scheduled by the Learning Center Coordinator, and understand that all questions, concerns or problems should be discussed during a scheduled meeting.

In the event of an accident, or sudden illness while at The Learning Center, and the parent cannot be reached, I authorize "The Learning Center" personnel to contact the physician listed on the child's registration forms to render such action and treatment as may be deemed necessary. If the parent and physician are both unavailable, I authorize The Learning Center staff to take whatever action that is necessary in their judgment for the health of my child.

I give permission for my child's photo to be taken in any form and to be introduced in any educational or promotional materials used by The Learning Center. ___yes ___no

Parent/Guardian Signature

date

Museum Learning Center

Immunization Policy

In order to help prevent the spread of illness and disease in individuals and in groups, it is the goal of the Learning Center to assure that each child enrolled receives all age appropriate immunizations, according to the Immunization schedule table 1 and 2.

It is not our intention to exclude any child or family from participating in the Museum Learning Center program because they have not received all of their age appropriate immunizations, although it is the policy of this program to require a current Commonwealth of Kentucky Immunization Certificate from a provider before the child may attend a group setting. The provider may be a doctor or the local Health Department.

Exemptions being, according to KRS214.036, Any child may be exempt from immunization at any time when:

- (a) In the written opinion of the attending physician, such immunizations would be injurious to the child's health.
- (b) Children whose parents are opposed to medical immunizations against disease and who object by a written sworn statement to the immunizations of such child based on religious grounds.

*We are aware, however, that in the event of an epidemic in a given area, the Cabinet for Human Resources may, by emergency regulations, require the immunization of all persons within the area of the epidemic, against the disease responsible for the epidemic.

Please fill out the following:

___ My child does not take regular immunizations. Circle Reason A or B.

___ My child does take regular immunizations and I understand the center needs a KY Certificate of Immunizations on file.

Parent/Guardian Signature

Date

Staff Signature

Date when Certificate is received.

ILLNESS & HOSPITALIZATION

Parental Consent for Medical Care

If you are the parent, you realize that for a variety of reasons you cannot be with your children twenty-four hours a day and seven days a week. Did you know that when you aren't with your children you can still protect them and have a say in any emergency medical care and treatment which they may need? The following parental consent form can be used to allow a nanny, daycare provider, babysitter, friend, or other trusted individual to make health care decisions for your child in your absence. Parental consent forms are important documents, and thoughtful consideration should be given to whether you want a certain person to act on your behalf. Remember, that person may be responsible for making serious decisions regarding your child's medical care, some of which may have a long-term or permanent effect. To help you in planning to protect your child's health, we've also provided a form that you can use to let your child's caregiver know about your child's medical history, your health insurance, and where you will be.

PARENTAL MEDICAL CONSENT

Parent Information

(Mother's Name)

(Mother's Address)

(Mother's Home Telephone Number)

(Mother's Business Telephone Number)

(Mother's Cell Phone Number)

(Father's Name)

(Father's Address)

(Father's Home Telephone Number)

(Father's Business Telephone Number)

(Mother's Cell Phone Number)

Child's Information

(Child's Name)

(Child's Address)

(Child's Date of Birth)

(Child's Social Security Number)

Consent: I/We hereby appoint:

(Name)

(Address)

(Telephone Number)

(Business Telephone Number)

(Cell Phone Number)

(Relationship to Family)

As the adult who, during my/our absence from _____, or during my/our work hours, shall be authorized to consent for all reasonable and necessary medical and/or surgical treatment and/or other medical procedures which are required during my/our absence for the above-named and described minor child.

I/We understand that in such a situation where medical and/or surgical treatment is required a reasonable attempt will first be made to contact me/us if the circumstances allow. In any event, I/we will be notified of any medical and/or surgical treatment or action taken as soon as is reasonably possible under the circumstances.

This consent shall remain in force until my/our child reaches the age of 18 or until I/we revoke the consent. If the above-named appointed adult wishes to refrain from making decisions on behalf of my/our child, he/she may do so at any time upon notification to me/us.

Signature of Parent/Legal Guardian

Date

Signature of Parent/Legal Guardian

Date

MEDICAL INFORMATION

Medical Insurance Information

(Insurance Carrier Name)

(Member's Name)

(Insurance Carrier Address)

(Insurance Plan Number and/or Identification No.)

(Member's Identification Code)

Medical History of Child

(Full Name of Child)

(Child's Date of Birth)

Does your child have any special needs that we need to know about? _____

Does your child need assistance or have any problems using the restroom alone? _____

Known Allergies: _____

Chronic or Existing Medical Conditions, Diseases, or Problems: _____

Medications: _____

Name and Address of Current Physician:

Telephone Number of Current Physician: _____

Signature of Parent/Legal Guardian

Date

Health

Children will not be permitted to attend our afterschool program or full day program if they are sick. The child's teacher will determine if the child is sick using the following criteria:

*runny nose *unknown rash *vomiting *communicable diseases
*flu symptoms (sore throat, runny nose, coughing, etc.) *fever of 100degees or more
*inflammation of the eyes (conjunctivitis) *more than one incident of diarrhea

If your child develops these symptoms while in our care they will be isolated from the other children and you will be called to pick up your child. If your child is sent home from school sick, they will not be permitted to attend our program that day.

Medication

The Museum Learning Center has a no mediations policy.

I understand at the present time the Museum Learning Center has a no medications Policy. If my child requires medication I understand that I must 1) one administer it at home or 2) two request in writing to the center that I need them to administer medicine. I must also provide adequate time for them (the center) to notify the state inspector to receive permission to administer such medications. I also understand that if my child is ill they will not be able to attend the program until they are better. I further understand that if they develop an illness while in the care of the center the staff will notify me immediately.

Signature of Parent/Legal Guardian

Date

Signature of Parent/Legal Guardian

Date



Rules and Regulations for the Museum Learning Center

1. No Child shall be permitted to leave the center for any reason without the supervision of an adult staff member.
2. No child shall be signed out for the day by anyone other than the parent/legal guardian or person(s) listed on their sign out sheet. If it will be necessary for your child to be picked up by any other person other than yourself, be sure that you fill out all of the information on the child release form provided in this packet.
3. No disrespect of staff or of other children will be tolerated. The Museum Learning Center follows a strict non-discrimination policy. Discrimination of any form will not be tolerated by Learning Center staff or by the children enrolled in the program.
4. No outside food or drink will be permitted, as this will not be fair to the other children. A snack will be provided at the center each day at promptly 4:00 p.m.
5. The Learning Center will offer discipline using “time out.” Any child receiving disciplinary action will be placed away from group activity and instructed to think about what they have done wrong and why they are receiving this punishment.
6. Running, cursing or name calling will not be permitted.
7. Children should dress appropriately. Mostly, the children should be comfortable. If your child wouldn't wear it to school, don't let them wear it to The Learning Center.
8. Children will bring home permission forms if there are activities occurring outside of our facility. The permission form must be signed and dated by the parent/legal guardian if you wish for your child to participate in any off site activity.
9. Parents or Persons responsible for picking children up should be at The Learning Center by 6:00 p.m. A late fee will be added to your weekly bill if your child is not picked up on time. See fees and schedules.
10. Do not allow children to bring valuables to The Learning Center. Our staff will not be responsible for these items.
11. There will be no need for the children to bring money to the center. If an occasion arises were the child will need money, parents will be notified.
12. All comments, questions or concerns of parents should be addressed to the program director during a scheduled meeting.
13. According to Kentucky state law Learning Center staff will be required to report all suspected child abuse or neglect. The Museum Learning Center will follow this directive.

Food Service

I understand that all meals and snacks are nutritionally balanced according to USDA guidelines. Weekly menus are posted on the informational board in the facility. All children enrolled in the center must have the USDA meals provided. Children/parents cannot bring an additional item unless it is approved in advance.

The amount of food that will be available is based on the number of children enrolled in the afterschool programs for snack. For full day service meals will be determined by the number signed in by 9am.

Our food service will be catered by a local food service provider if you wish to view their food service permit it will be available on the informational board located in the center.

Children will be encouraged to try all food served. Food shall not and will not be used as any form of reward or punishment. If you would like to celebrate a birthday or other occasion with cupcakes, cookies, etc. it will be during the afternoon snack period. You must bring enough for all of the children enrolled in the program. These snacks must be purchased at a location such as Kroger U Save. Snack foods cannot be homemade it is against state regulations for us to serve them.

Vacations

Each child will receive two weeks of vacation annually with no charge for the weeks absent. This vacation time cannot be split up but served consecutively. A vacation form must be completed confirming dates of vacation. If a vacation form is not turned in at least one week in advance, the vacation will not be excused.

Discipline

Inappropriate behavior will be handles as follows: A parent will receive three (3) written warnings of inappropriate behavior. After three warnings, a meeting will be set with the parents and the director to discuss the problems and possible corrections. If the inappropriate behavior continues, the child will be dismissed from the Museum Learning Center.

Nit Free Policy

We reserve the right to check a child's head if we have reason to believe the child might have lice. Your child is found to have lice or nits; you will be notified immediately to pick the child up. Notes will be sent home stating that lice has been found in the center with each child. (Names will not be used.) Children who are found to have lice or nits will not permitted to return to the center until they are lice and nit free. Fees will not be reduced for such occurrences.

Field Trip Policy

The Museum Learning Center will on occasion take the children to the Museum or train depot in Stearns for educational activities. Such trips will be scheduled in advance and parents will be required to complete permission forms. I understand that my child will not be transported by car at any time. If I do not want my child to participate on such occasions I will state this on each permission form.

Regular Operations - Daily Schedule of Activity

The following schedule will be used when the program is in regular operation:

2:00-3:00:	Staff Sign-in and Prepare the Center for the Children's Arrival
3:00-3:30:	Children Arriving
3:30-3:50:	Attendance and Supervised Play
3:50-4:00:	Hand Washing and Seating for Snacks
4:00-4:30:	Snack Time
4:30-5:00:	Homework Help time
5:00-5:45:	Scheduled Activity: Crafts, Storytelling, Role Play, etc.
5:45-6:00:	Clean Up Time and Preparation for Dismissal and Parent Sign out

Special Full Days - Daily Schedule of Activity

The following schedule will be used when the program is in operation for a full day due to a school cancelation:

6:00-7:00	Staff Sign-in and Prepare the Center for the Day
7:00-8:00	Children Begin Arriving at the Center
8:00-8:30	Hand Washing and Breakfast
8:30-10:00	Scheduled Craft Activity
10:00-11:00	Supervised Free Time for Play and Recreation
11:00-12:00	Hand Washing and Lunch
12:00-1:00	Story Telling and Role Play
1:00-3:30	Movie Time (G Rated Movie)
3:30-4:15	Hand Washing and Snack Time
4:15-5:30	Supervised Free Time for Play and Recreation
5:30-6:00	Clean Up and Preparation for Parent Pick Up

Staff-to-Child Ratios

Kentucky State Regulations require the minimum staff-to-child ratio to be maintained as follows:

<u>Age of Child</u>	<u>Ratio</u>	<u>Max Grp #</u>
5 to 7 Years	1 staff for 15 children	30
7 and older	1 staff for 25 children	30

*The Museum Learning Center plans to maintain a ratio of 1 staff for every 10 children.

* In the case of a child with disabilities we plan to have a 1 staff per 5 children policy, the ratio will be determined based on disability.

Privacy & Confidentiality

In accordance with state regulations for child care facilities, all information concerning children, their parents, relatives or guardians shall be kept in strict confidence by staff, except for sharing information with individuals who are personally responsible for the well-being of the child.

Non-Discrimination Policy

The Museum Learning Center does not discriminate on the basis of race, color, creed, religion, national origin, gender, or disability.

Open Door Policy

The Museum Learning Center upholds the open door policy for parents. This means that parents are welcomed and encouraged to come by and visit your child as well as participate in all activities with your child. All suggestions and concerns are welcomed and will be addressed by Learning Center staff. **If you need to meet with the director or the program coordinator you can contact them at 376-5730.**

CHILDREN AND PARENT RIGHTS
PURSUANT TO KRS 199.898

All children receiving child-care services in a day-care center licensed pursuant to KRS 199.896, a family child-care home certified pursuant to KRS 199.8982, or from a provider or program receiving public funds shall have the following rights:

- (a) The right to be free from physical or mental abuse;
- (b) The right not to be subjected to abusive language or abusive punishment;
and
- (c) The right to be in the care of adults who shall meet their health, safety and developmental needs.

Parents, custodians or guardians of children specified in subsection (1) of this section shall have the following rights:

- (a) The right to have access to their children at all times the child is in care and access to the provider caring for their children during normal hours of provider operation and whenever the children are in the care of the provider;
- (b) The right to be provided with information about child-care regulatory standards, if applicable; where to direct questions about regulatory standards; and how to file a complaint;
- (c) The right to file a complaint against a child-care provider without any retribution against the parent, custodian, guardian or child;
- (d) The right to obtain information from the cabinet regarding any type of licensure denial, suspension, or revocation of an operator, and cabinet reports that have found abuse or neglect by any child-care provider or any employee of a child-care provider. Identifying information regarding children and their families shall remain confidential;
- (e) The right to obtain information from the cabinet regarding the inspections and plans of correction of the day-care center, the family child care home, or the provider or program receiving public funds within the past year; and
- (f) The right to review and discuss with the provider any state reports and deficiencies revealed by such reports.

The child-care provider who is licensed pursuant to KRS 199.896 or certified pursuant to KRS 199.8982 shall post these rights in a prominent place and shall provide a copy of these rights to the parent, custodian or guardian of the child at the time of the child's enrollment in the program.

Effective: July 15, 1998

**Division of Regulated Child Care, 275 East Main Street, 6E-B, Frankfort, KY 40621
Telephone # 502-564-7962**

Museum Learning Center

Fees and Operational Hours

The Museum Learning Center will provide service to children ages 5-12.

After School Schedule Fees Monday- Friday 3:00-6:00p.m.

	Regular Rate	Prepay Discount
Daily Rate	\$9.00	--
Weekly Rate	\$45.00	\$30.00

Full Day Schedule

All Day 6:00 a.m. – 6:00 p.m.

Our full day schedule includes school holidays, school breaks and snow days. In the event of snow days we may not open exactly at 6:00 a.m. depending on what time school is called off. Parents may call 606-310-9134 to find out what time the center will open. Please note: We will not open in SEVERE weather.

Full Day Schedule Fees

	Regular Rate	Prepay Discount
Daily Rate	\$15.00	--
Weekly Rate	\$75.00	\$60.00

If not prepay, payment will be due in full when your child is picked up each Friday.

Please keep in mind fees will not be returned due to absences for prepay discount.

If your child is not picked up by closing at 6:00 p.m., there will be an additional charge of \$2.00 for every 10 minutes thereafter. (For example 6:01-6:10 you will be charged \$2.00, 6:11-6:20 you will be charged \$4.00, and so forth.)

This policy is set in place to ensure that children are picked up promptly from the center.

Depending on your household size and gross monthly income you may be eligible for assistance in paying for your child care needs. **Call 376-5303 and speak with Kay Roberts**, the intake counselor for the Eastern KY Child Care Coalition tell her you are interested in applying for assistance for the Museum Learning Center.