



**Gore Bay Child Care**

**Will you be applying for subsidy?** Yes  No

**How did you hear about us?**

Word of Mouth  School  Media  Flyer  Other

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

Name of Siblings: \_\_\_\_\_ Age of Siblings: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**What language(s) does this child speak at home?**

English  French  Other \_\_\_\_\_

Child's Ontario Health Card Number (optional): \_\_\_\_\_

**What is your relationship to the above named child?**

Mother  Father  Guardian  Step-Parent

**What is your current relationship or marital status? (Choose only one)**

Married  Common Law  Lone Parent   
Blended  Divorced  Separated

Is there a Custody Agreement? Yes  No  If yes, please provide a copy

Parent/Guardian Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Box#: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_  
Name of Employer or School: \_\_\_\_\_  
Work/School # \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Box#: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_  
Name of Employer or School: \_\_\_\_\_  
Work/School # \_\_\_\_\_

Are there any other adults (not already listed) caring for the child listed above? Yes  No

If yes, what is the relationship to the child?

**In Case of Emergency**

Name of person(s) to be contacted if parent cannot be reached in case of an emergency during hours of care.

Full Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Home # \_\_\_\_\_

Cell/Phone #: \_\_\_\_\_ Authorized to pick up without notification

Full Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Home # \_\_\_\_\_

Cell/Phone #: \_\_\_\_\_ Authorized to pick up without notification

Full Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Home # \_\_\_\_\_

Cell/Phone #: \_\_\_\_\_ Authorized to pick up without notification

**Contact for Follow-up**

In case you move or change telephone number, it would be helpful if you could give us the name of a friend or relative who could help us to reach you to send the yearly tax receipts. We will be in touch with this person only if we cannot reach you and then only to ask for your new address or telephone number.

Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

**Child's Family Physician**

Name of Physician: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Child's previous history of communicable diseases	Dates
_____	_____
_____	_____
_____	_____

**Special medical conditions:**

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**Describe your child's general health (e.g. recent colds , ear infections , stomach aches, etc.)**

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**Symptoms of child's ill health (indicate child's usual reaction to illness e.g. high temperature, vomiting.)**

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**Special requirements for diet, rest, or exercise** (*written and signed instructions must be provided by a parent of the child*):

**Record of Immunization**

Please provide a copy of the record of immunization of the child.

If the child has not been immunized, a parent of the child must provide a written statement that immunization conflicts with the sincerely held convictions of the parent's conscience or a legally qualified medical practitioner must give medical reasons in writing as to why the child should not be immunized.

**Cultural or Religious Restrictions:**

**Describe your child's particular attachment (e.g. toy, blanket, pet, person, etc.) and any particular habits (e.g. thumb-sucking, rocking, etc.):**

**Is there anything else that you would like to tell us about your child, to help us provide good care?**

Parent/Guardian's Signature:

Date:

For Office Use Only

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

Date of Admission: \_\_\_\_\_

Date of Discharge: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_

Last Updated: October 2018

## In Case of Emergency ...

### Parental Consent for Emergency Care and Transportation

**Childs Name:** \_\_\_\_\_

If at any time, due to such circumstances as an injury or sudden illness, medical treatment is necessary, I authorize Gore Bay Child Care staff to take whatever emergency measures they deem necessary for the protection of my child under their care. I understand that this may involve calling a physician, interpreting and carrying out his/her instructions and transporting my child to a hospital or physician's office, including the possible use of an ambulance. I understand that this may be done prior to contacting me, and that any expense incurred for such treatment, including ambulance fees, is my responsibility.

**Initial :** \_\_\_\_\_

## Bicycle Helmet Agreement

**Childs Name:** \_\_\_\_\_

This is to certify that I understand that my child will need to wear a bicycle helmet to use the centre's wheeled vehicles. I am aware that Gore Bay Child Care Centre will supply the helmets and make sure that they fit correctly. I also understand that if my child chooses to not wear a helmet he/she will be unable to use the centre's wheeled vehicles.

**Initial :** \_\_\_\_\_

## Permissions

**Childs Name:** \_\_\_\_\_

I, the undersigned, grant permission to Gore Bay Child Care Centre, to include my child in the centre's program evaluation and of the quality of care the children enrolled are receiving.

I, the undersigned, grant permission to Gore Bay Child Care Centre to include my child and/or myself in all photographs, video and audio tapes to be used at the centre's discretion for the purpose of professional development and training, community education and for the promotion of the services.

I, the undersigned, grant permission to my child to leave the centre's premises in all neighborhood walks and visits to the neighborhood park under staff supervision. In the event that a field trip is scheduled or transportation is required, the centre will provide me with a specific authorization form to be signed.

**Parent/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Playground Agreement

Child's Name: \_\_\_\_\_

This is to certify that I understand that my child will need to wear running shoes, boots, sandals or rubber boots to be able to play on the playground structure. I also understand that my child needs to wear clothes that are free of strings to be able to play on the playground structure.

Initial : \_\_\_\_\_

## Sleep Time

Child's Name: \_\_\_\_\_

Since the sleep time routine may sometimes disrupt my child's normal sleeping pattern, as a parent, I request that during this routine my child:

- Sleep for 30 minutes
- sleep for 1 hour
- sleep for 1.5 hours
- sleep for 2 hours
- rests and participates in quiet activities
- not applicable

Initial : \_\_\_\_\_

## Sunscreen Authorization

Child's Name: \_\_\_\_\_

I give permission to the staff of Gore Bay Child Care Centre to apply SPF 50 sunscreen on my child as needed.

- Yes, I agree to provide my child with a hat to protect him/her from UV Rays.
- Yes, I agree to inform the centre in writing of any changes to this agreement.
- No, I do not give permission for Gore Bay Child Care Centre to apply sunscreen.

I understand that I will not hold Gore Bay Child Care responsible for sunburns to my child if my child or I refuse to have sunscreen applied.

Initial : \_\_\_\_\_

## Health Information

Child's Name: \_\_\_\_\_

Please check all that apply. My child suffers from:

Allergy                      Yes       No       specify: \_\_\_\_\_

Asthma                      Yes       No       specify: \_\_\_\_\_

Heart Condition            Yes       No       specify: \_\_\_\_\_

Intolerance                Yes       No       specify: \_\_\_\_\_

Medical Condition        Yes       No       specify: \_\_\_\_\_

Seizure                      Yes       No       specify: \_\_\_\_\_

If you have checked yes for any of the above, please give us more information in the space provided below.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PHOTOGRAPH CONSENT FORM - CHILD(REN)

I hereby authorize Gore Bay Child Care Centre to take photographs/slides/videos of my child(ren) at the daycare. I understand that other children may appear on my own photographs/slides/videos and my child(ren) may appear on anyone else's.

Child(ren) Name (Please Print)	Date of Birth

I also authorize Gore Bay Child Care Centre to use and display photographs/slides/videos of my child(ren) in the following publication(s):

- |                             |                       |                     |                       |
|-----------------------------|-----------------------|---------------------|-----------------------|
| Gore Bay Child Care Website | <input type="radio"/> | Displays (External) | <input type="radio"/> |
| Pamphlets                   | <input type="radio"/> | GBCCC Facebook Page | <input type="radio"/> |
| School                      | <input type="radio"/> | DSB                 | <input type="radio"/> |
| Children's Portfolios       | <input type="radio"/> |                     |                       |
| Displays (Internal)         | <input type="radio"/> |                     |                       |

The undersigned releases and forever discharges Gore Bay Child Care Centre, its agents, officers and employees from any and all claims and demands arising out of or in connection with the use of said photographs/slides/videos, including but not limited to, any claims for invasion of privacy or defamation.

**Parent/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\* Examples of Displays (Internal or External ) include: Documentation, bulletin boards, display boards, posters, advertisements, PowerPoint presentations



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## Agreement to Exchange Information

Good communication between the professionals who work with your child may be necessary or desirable to assist him/her. At times, it is important that the daycare exchanges information about your child with the school or other agencies, such as attendance, illness, progress and behavior.

The information will be exchanged in confidence only when necessary and only for the period during which the child attends the daycare or when the parents request it.

Your consent is essential to allow the daycare to exchange information about your child.

**I authorize Gore Bay Child Care to exchange information on my child with:**


**Parent/Guardian's Signature:** \_\_\_\_\_

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





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## Guidance and Discipline Policy

**Child's Name :** \_\_\_\_\_

As prevention to misbehavior, educators ensure that the following elements are incorporated into their program:

- a curriculum that provides opportunities for children to get involved in interesting, challenging and fun activities
- evaluation the environment regularly and changing it when required
- educators modeling problem solving, courtesy and respect between themselves and the children
- flexibility with activities and program schedule
- consistency in the application of rules and policies about acceptable behavior

We use discipline as a means to teach responsibility and self-discipline by carefully choosing disciplinary methods which put the child at choice about his own behavior and its consequences, we help the children feel in control of their lives and able to make responsible choices.

There are 2 main reasons for discipline and both are taken into consideration when a staff member chooses a method for dealing with behavior problems:

- in order to keep the children safe from physical and emotional harm from other children and to keep the facility safe from abuse or misuse by the children
- in order to teach the children self-discipline

**The following are the levels of behavior and how we deal with them:**

Surface Behavior:

generally spontaneous, not meant to hurt anyone but disruptive and can spread to the group quickly

Intervention:

- ignoring or tolerating it
- proximity (walking over and standing in the area)

Misbehavior:

defiance of rules, dangerous to the children or the facility, happens quickly

Intervention:

- warning (what the child should be doing with it and what happens if the behavior continues)
- redirection (child provided with time by himself or a choice of a new activity for a set amount of time prior to returning to the area or activity where the misbehavior occurred)
- removal of privileges (the child loses the privilege of using equipment or area in which the misbehavior occurred for a set amount of time as determined by the educator)
- parent involvement (informing parents of the misbehavior and getting their assistance with discipline; incident report or phone call from educator or supervisor)
- referrals (to other agencies for support/ services)
- exclusion from the program (last resort)

Conflict:

between children or between children and educators; the inability of two persons to resolve their differences in an appropriate way

Intervention:

- create a situation in which everyone involved gets some or all of their needs met. Involve the children and compromise (mediate)

**PLEASE NOTE:**

On-going incidents and/or group dynamics are recorded and discussed with parents, educators and supervisor.

When a child displays verbal or physical aggression towards another person, the staff member will accept no excuses but rather ask the child what his intention was. This assists the child in assuming ownership of his actions.

**Our Team applies the following techniques to encourage positive behaviors:**

- clear limits and expectations
- positive reinforcement
- reward system

**Action Plan to Manage Challenging Behaviors**

Should the child appear to lose control i.e. by throwing objects or physically abusive or aggressive towards himself, others, the educators, the child may be encouraged to go to a quiet spot (to be determined). Should the child not want to comply, the other children will need to be removed from the room. An educator will stay with this child in the room to ensure his safety - respect his space. Another staff will stay with the rest of the group. Should attempts to calm or redirect the child be ineffective or the staff be unable to provide support in the way of ensuring the child's safety and the safety of other children/adults, the educator will call the following numbers and caregivers will be recommended by the centre to find alternate care for the remainder of the day. The child will have to be picked up within **30 minutes**.

**Contact numbers:**

I, the undersigned, hereby certify that I have read and understand and will abide with the above-mentioned conditions.

Further, I had the opportunity to discuss these with the Supervisor or designate.

**Parent/Guardian's Signature:** \_\_\_\_\_

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



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## Respect of Policies and Procedures

**Child's Name:** \_\_\_\_\_

1. As the parent, I will comply with the hours of child care as indicated in the parent handbook. I also understand that there will be a charge of \$2.50 per minute, for every minute after the daycare's regular hours of care, until the child is picked up.
2. I agree to inform the centre the night prior, if possible, when my child will not be present the following day. Otherwise, I agree to inform the centre before 9:30 a.m. that my child will not be attending.
3. I agree to give Gore Bay Child Care Centre a written notice of any changes to the enrollment schedule.
4. I agree to ensure that all the information in my child's file is kept up-to-date. I will inform Gore Bay Child Care Centre in writing, of any relevant changes. ( i.e. immunization, home or work place information, child's health ... )
5. I agree to inform Gore Bay Child Care Centre of any allergies, special dietary concerns or eating problems my child may have. In the case of a special diet, I agree to meet with the centre's cook and supervisor.
6. I agree that I will not bring any food into the daycare (excluding special diets).
7. I agree to advise the centre when I am unavailable in case of an emergency, and agree to provide the name and phone number of an alternative person that will be able to pick the child up if necessary.
8. I agree to ensure that the centre has an adequate supply of creams if my child is not toilet trained.
9. I agree to ensure that the centre has a change of indoor clothing, running shoes and appropriate outdoor clothing for my child at all times. I also understand that Gore Bay Child Care Centre is not responsible for any lost, stolen or damaged items.
10. I agree that my child will not attend daycare if he /she has a communicable disease, an infection, or a serious illness. I will inform Gore Bay Child Care Centre if my child has any above-mentioned condition as soon as possible. See parent handbook for further information.
11. I agree that if my child has diarrhea or is vomiting, they cannot return to the daycare until they have been clear of any symptoms for 24 hours.
12. I understand that it is Gore Bay Child Care Centre staffs professional and personal obligation to contact the Children's Aid Society in cases where:
  - there is a suspicion of child abuse; or
  - my child has not been picked-up after one hour past closing time.
  - see parent handbook for further details.
13. I agree to communicate openly with the Educators and Supervisor to alleviate any concerns regarding the care that my child is receiving.

Application for Enrollment in Childcare

14. I agree to pay all monthly invoices in full by the due date. I understand that the invoice is based on my child's enrolment schedule.

15. I agree to give Gore Bay Child Care Centre at least two weeks written notice of termination. In the case of immediate termination, I understand that full program fees will be invoiced for the two weeks in question.

16. I understand that my child may be discharged if:

- my child does not attend the daycare according to the enrollment schedule;
- a disruption in attendance has a negative impact on my child or the program;
- the needs of my child cannot be met by the program;
- my child care account is in arrears.

17. I understand that failure to comply with this agreement will result in my child being discharged from child care programs.

18. I understand that this agreement is effective until further notice.

I, the undersigned, hereby certify that I have read and understand and will abide with the above-mentioned conditions, policies, and procedures as outlined in the parent handbook .

**Parent/Guardian's Signature:** \_\_\_\_\_

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

**Enrollment Schedule Contract  
Between Gore Bay Child Care Centre and the parent or legal guardian  
(one form per child)**

All receipts, including yearly tax receipts, will only be issued to the individual who paid the invoice.

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

Childcare fees are set to cover operational expenses of the centre, these fees are payable by the last day of the month. This statement will include all the days the child is enrolled for the month. It will also include the Statutory Holidays and the Professional Development Days at the daily rate based on the child's regular schedule for that specific month.

Parents are required to give a minimum of two weeks written notice prior to withdrawing their child from the centre or they will be invoiced for the two weeks. Also, parents are required to give two weeks' notice if making changes to this contract.

**Enrollment Schedule**  
Please indicate the hours of care that you need in each day.

	Monday	Tuesday	Wednesday	Thursday	Friday
<b>Socialization</b>					
<b>Full Day</b>					
<b>Before school</b>					
<b>After school</b>					
<b>Before &amp; after school</b>					
<b>Part-time On Call</b>					

**\*Please note that all days listed above will be invoiced. \***

**Part time on call services will only be available if the ratios allow it the day when the service is necessary.**

Yes, I would like to receive my invoice by email: \_\_\_\_\_

I, the undersigned, hereby certify that I have read and understand and will abide with the above-mentioned conditions as outlined in this contract.

Printed name of parent/guardian \_\_\_\_\_ Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_































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