

SK  Accounting  Office File  School File  Check # \_\_\_\_\_ or cash \$Amount \_\_\_\_\_

Registration Date: \_\_\_\_\_ Enrollment Date: \_\_\_\_\_ Birth Certificate Verified

## Enrollment for South Daytona Christian School

### Please check program(s) child will be attending:

3 year old 4Day M-TH  4 year old VPK  Extended Day 2:30pm  Extended Day 5:30pm

Elementary After School  Hours of care range from 7:30am to 5:30pm - Monday through Friday

### Student Information:

Name: \_\_\_\_\_ Boy/Girl \_\_\_\_\_  
Last First Middle Preferred (nickname)

Address \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Street City Zip Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Family Information:

Mother's Name _____	Father's Name _____
Address _____	Address _____
Home Phone _____	Home Phone _____
Employer _____	Employer _____
Address _____	Address _____
Work Phone _____	Work Phone _____
Cell Phone _____	Cell Phone _____

**Custody:** Mother \_\_\_\_\_ Father \_\_\_\_\_ Both \_\_\_\_\_ Other \_\_\_\_\_

This portion is for After School only:

Elementary Grade child entering: \_\_\_\_\_ Teacher \_\_\_\_\_

Please list name of anyone **not** permitted to remove child. (Copy of court order is required.)

### Contacts

Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident, or emergency, if for some reason the custodial parent or legal guardian can not be reached.

\_\_\_\_\_  
Name Address Work# Home #

\_\_\_\_\_  
Name Address Work# Home #

\_\_\_\_\_  
Name Address Work# Home #

Church Affiliation \_\_\_\_\_

Brothers and sisters (names and date of birth)

\_\_\_\_\_

Language spoken at home: \_\_\_\_\_

How did you find out about our school? \_\_\_\_\_

Helpful Information About Child:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Sections 7.1 and 7.2, of the Child Care Facility Handbook, require a current physical examination(Form 3040) and immunization record (Form 680 or 681) within 30 days of enrollment.

\*Section 7.3, of the Child Care Facility Handbook, requires that parents receive a copy of the Child Care Facility Brochure, "Know Your Child Care Facility" (CF/PI 175-24)

\*Section 2.8, of the Child Care Facility Handbook, requires that parents are notified in writing of the disciplinary and expulsion policies used by the child care facility

I understand that my child(ren)'s picture may be taken throughout the school year and may be posted in the school, on our program videos or on our web or facebook page. We will never associate a child's name with a picture online.

By signing below, you verify that you have read the above and that all information on this enrollment form is complete and accurate. A child will be considered registered for next year when all paper work is completed, the registration fee is paid in full and any past due tuition has been brought up to date. There is a **\$100 registration fee for NON-VPK classes**. There is no fee for VPK classes. VPK families should make an appointment with the Early Learning Coalition to file for coverage (go to [elcfv.org](http://elcfv.org) to do step 1 and then call the ELC at 323-2400)

\_\_\_\_\_  
**Signature of Parent/Guardian**

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

I give permission for my address and phone number to be released only within my child's class. This aids in communication between families to set up class parties, birthdays, etc.

\_\_\_\_\_  
**Signature of Parent/Guardian**

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

**Medical Emergency Release**

We hereby release South Daytona Christian Church and School from liability for injury or damage resulting from emergency medical treatment of our child \_\_\_\_\_ during the school year \_\_\_\_\_ through \_\_\_\_\_. I understand that my child is not covered by accident insurance while attending any part of the South Daytona Christian School program, and that it is my responsibility to provide insurance for my child.

It is understood that the school will follow these procedures in an emergency:

1. Administer minor first aid treatment by a qualified person (holder of first aid certificate from American Red Cross)
2. If this is not judged to be adequate, parents will be contacted immediately; if parents can not be contacted immediately, the person the parents have named as emergency contact will be called.
3. In a critical injury we will call 911 and then call the parent, and then emergency contact if a parent can't be reached.

**Medical Information:**

I hereby grant permission for the staff or emergency responder to contact the following medical personnel to obtain emergency medical care or information if warranted.

Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Dentist \_\_\_\_\_ Phone \_\_\_\_\_

Hospital Preference \_\_\_\_\_

Please list allergies, special medical or dietary needs, or other areas of concern:

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

\_\_\_\_\_  
Alternate Adults (If parent cannot be reached) Phone # (s)

\_\_\_\_\_  
Father's Place of Employment Phone # Cell #

\_\_\_\_\_  
Mother's Place of Employment Phone # Cell #

\_\_\_\_\_  
Parent or Guardian Signature Date

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day

of \_\_\_\_\_, 20\_\_\_\_\_ by \_\_\_\_\_.

Identification:  
Personally known \_\_\_\_\_  
Driver's license \_\_\_\_\_

\_\_\_\_\_  
Notary

## Field Trip Permission

It is necessary that this form remain on file for every child in our center. No child will be allowed to leave the center without parental permission given. *You will always receive information and details about upcoming outings from your teacher prior to field trips or special outings.*

I give my permission for my child to go on any field trip that is to be taken this year.

\_\_\_\_\_ yes  
\_\_\_\_\_ no

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Preschool/VPK only:

I would be able to help when asked by accompanying my child's group as a parent - helper.

\_\_\_\_\_ yes  
\_\_\_\_\_ no

I would be able to help at times by providing transportation for \_\_\_\_\_  
number of children in my car.

\_\_\_\_\_ yes  
\_\_\_\_\_ no

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*Note: South Daytona Christian School will not be responsible for accidents. (See medical release)  
However, every precaution for your child's safety will be taken.*

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

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## DISCIPLINE POLICY

**Redirecting away from disruptive behavior to desired behaviors, or "Time Out" are the forms of positive discipline used. Consistent enforcement in school and reinforcement at home will achieve the desired effects in most cases. We do reserve the right to expel a child who continues to do harm to another child or teacher. We encourage parents to solicit our help as a cooperative effort will be in the best interest of the child.**

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

**South Daytona Christian School  
2121 Kenilworth Avenue  
South Daytona, FL 32119**

During the 2009 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes provide parents with information detailing the causes, symptoms, and transmission of the influenza virus (the flu) every year during August and September.

My signature below verifies receipt of the brochure on *Influenza Virus, The Flu, A Guide to Parents*:

Name: \_\_\_\_\_  
 Child's Name: \_\_\_\_\_  
 Date Received: \_\_\_\_\_  
 Signature: \_\_\_\_\_

Please complete and return this portion of the brochure to your child care provider, in order for them to maintain it in their records.



### What should I do if my child gets sick?

Consult your doctor and make sure your child gets plenty of rest and drinks a lot of fluids. Never give aspirin or medicine that has aspirin in it to children or teenagers who may have the flu.

#### CALL OR TAKE YOUR CHILD TO A DOCTOR RIGHT AWAY IF YOUR CHILD:

- Has a high fever or fever that lasts a long time
- Has trouble breathing or breathes fast
- Has skin that looks blue
- Is not drinking enough
- Seems confused, will not wake up, does not want to be held, or has seizures (uncontrolled shaking)
- Gets better but then worse again
- Has other conditions (like heart or lung disease, diabetes) that get worse



### How can I protect my child from the flu?

A flu vaccine is the best way to protect against the flu. Because the flu virus changes year to year, annual vaccination against the flu is recommended. The CDC recommends that all children from the ages of 6 months up to their 19th birthday receive a flu vaccine every fall or winter (children receiving a vaccine for the first time require two doses). You also can protect your child by receiving a flu vaccine yourself.

### What can I do to prevent the spread of germs?

The main way that the flu spreads is in respiratory droplets from coughing and sneezing. This can happen when droplets from a cough or sneeze of an infected person are propelled through the air and infect someone nearby. Though much less frequent, the flu may also spread through indirect contact with contaminated hands and articles soiled with nose and throat secretions. To prevent the spread of germs:

- Wash hands often with soap and water.
- Cover mouth/nose during coughs and sneezes. If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.
- Limit contact with people who show signs of illness.
- Keep hands away from the face. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.



### When should my child stay home from child care?

A person may be contagious and able to spread the virus from 1 day before showing symptoms to up to 5 days after getting sick. The time frame could be longer in children and in people who don't fight disease well (people with weakened immune systems). When sick, your child should stay at home to rest and to avoid giving the flu to other children and should not return to child care or other group setting until his or her temperature has been normal and has been sign and symptom free for a period of 24 hours.

For additional helpful information about the dangers of the flu and how to protect your child, visit: <http://www.cdc.gov/flu/> or <http://www.immunizeflorida.org/>

## What is the influenza (flu) virus?

Influenza ("the flu") is caused by a virus which infects the nose, throat, and lungs. According to the US Center for Disease Control and Prevention (CDC), the flu is more dangerous than the common cold for children. Unlike the common cold, the flu can cause severe illness and life threatening complications in many people. Children under 5 who have the flu commonly need medical care. Severe flu complications are most common in children younger than 2 years old. Flu season can begin as early as October and last as late as May.



## How can I tell if my child has a cold, or the flu?

Most people with the flu feel tired and have fever, headache, dry cough, sore throat, runny or stuffy nose, and sore muscles. Some people, especially children, may also have stomach problems and diarrhea. Because the flu and colds have similar symptoms, it can be difficult to tell the difference between them based on symptoms alone. In general, the flu is worse than the common cold, and symptoms such as fever, body aches, extreme tiredness, and dry cough are more common and intense. People with colds are more likely to have a runny or stuffy nose. Colds generally do not result in serious health problems, such as pneumonia, bacterial infections, or hospitalizations.



For additional information, please visit  
[www.myflorida.com/childcare](http://www.myflorida.com/childcare) or contact your  
local licensing office below:

CF/PI 175-70, June 2009

*This brochure was created by the Department of Children and Families in consultation with the Department of Health.*

# INFLUENZA VIRUS



**"The Flu"  
A Guide  
for Parents**



## FACTS ABOUT HEATSTROKE:

It only takes a car **10 minutes to heat up 20** degrees and become deadly.

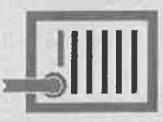
Even with a **window cracked**, the temperature inside a vehicle can cause heatstroke.

The body temperature of a child increases **3 to 5 times faster** than an adult's body.

## ⚠️ PREVENTION TIPS:

- Never leave your child alone in a car and call 911 if you see any child locked in a car!
- Make a habit of checking the front and back seat of the car before you walk away.
- Be especially mindful during hectic or busy times, schedule or route changes, and periods of emotional stress or chaos.
- Create reminders by putting something in the back seat that you will need at work, school or home such as a briefcase, purse, cell phone or your left shoe.
- Keep a stuffed animal in the baby's car seat and place it on the front seat as a reminder when the baby is in the back seat.
- Set a calendar reminder on your electronic device to make sure you dropped your child off at child care.
- Make it a routine to always notify your child's child care provider in advance if your child is going to be late or absent; ask them to contact you if your child hasn't arrived as scheduled.

**During the 2018 legislative session,** a new law was passed that requires child care facilities, family day care homes and large family child care homes to provide parents, during the months of April and September each year, with information regarding the potential for distracted adults to fail to drop off a child at the facility/home and instead leave them in the adult's vehicle upon arrival at the adult's destination.



**My signature below verifies receipt of the Distracted Adult brochure**

Parent/Guardian:

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Child's Name:

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Date:

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Please complete and return this portion of the brochure to your child care provider, to maintain the receipt in their records.

**A change in daily routine,**  
lack of sleep, stress, fatigue,  
cell phone use, and simple  
distractions are some things  
parents experience and can be  
contributing factors as to why  
children have been left  
unknowingly in vehicles...



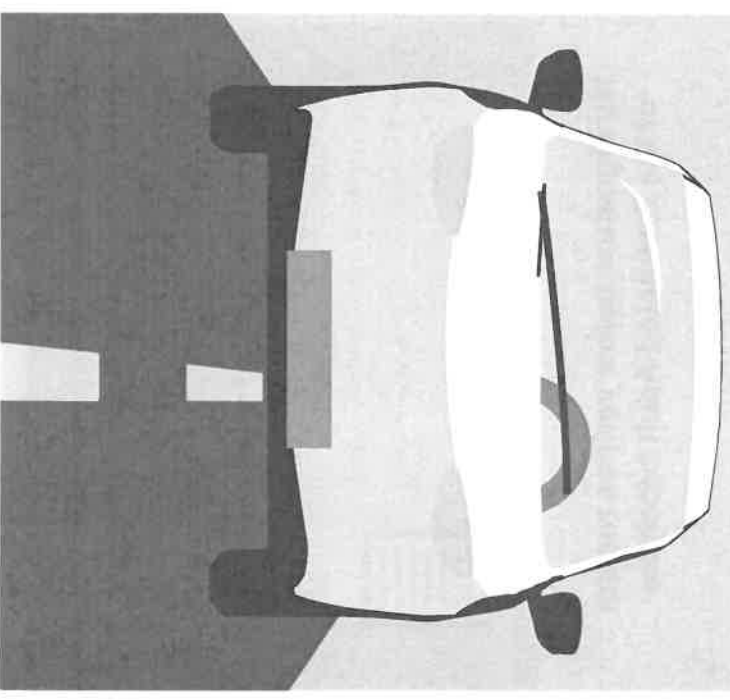
Developed by:

The Office of Child Care Regulation

[www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare)

CF/PI 175-12, May 2019

When life happens... Don't be a  
**DISTRACTED  
ADULT**





# Permission for Food-related Activities & Special Occasion food consumption

Pursuant to 65C-22.005(1.)c)2., Licensed child care facilities must obtain written permission from parents / guardians regarding a child's participation in food related activities. These activities include such things as classroom cooking projects, gardening, school wide celebrations, and birthdays.

I \_\_\_\_\_ give / decline permission for my child \_\_\_\_\_  
(Parent or Guardian) (circle one) (Child's name)

To participate in food related activities and special occasions wherein food is consumed.

Please provide the following information:

\_\_\_\_\_ My child **DOES NOT** have a food allergy or dietary restriction. He or she may participate in activities.

\_\_\_\_\_ My child **DOES NOT** have a food allergy or dietary restriction. He or she may not participate in activities.

\_\_\_\_\_ My child **DOES** have a food allergy or dietary restriction. He or she may participate in activities, but may not eat or handle the following items (please list below):

\_\_\_\_\_ My child **DOES** have a food allergy or dietary restriction. He or she may not participate in activities.

I understand that it is my responsibility to update this form in the event that my decision for permission changes. I agree that this form will remain in effect during the term of my child's enrollment.

\_\_\_\_\_  
(Parent or Guardian)

\_\_\_\_\_  
(Date)

