

## Reading Friends of Keller Admission Form

Facility Name	Director's Name	Days/Hours in Our Care	Date of Admission
Reading Friends	Marsha Wesley		
Parents' Names		Parent(s) Email Address(e	s)
Child's Name	Child's DOB	Child's Home	e Phone Number
Child's Home Addr	ess	Emergency Contact's Info	rmation (Non-Parent)
Street Address		First & Last Name	Phone Number
City, State, Zip Code		Street Address	City, State, Zip Code
Parent's Name & A	Address If Different fro	om Above	
Mom's Cell	Mom's Office	Dad's Cell	Dad's Office
I give consent for meand phone number			Please list their name(s)

#### **ALLERGIES & SENSITIVITIES**

Please list all allergies, existing illnesses, previous serious illnesses, injuries during the past 12 months, any medication prescribed for long-term continuous use, and any other information for which we should be aware:

If your child's allergy requires an Epi Pen or other medication, your doctor will need to fill out a F.A.R.E. form.



### **Emergency Medical Authorization**

In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize the person in charge to take my child to the following doctor or hospital: Name of Physician Phone Number Address Phone Number Name of Hospital Address **Emergency Medical Release** I authorize Reading Friends of Keller to arrange any and all necessary emergency medical treatment in the event I cannot be reached. Child's Name Parent/Guardian Signature Wellness Statement (This section to be completed by a health care provider.) I have examined the above child named within the past year and find that he/she is physically able to take part in school activities. Health Care Provider's Signature Date Please include a copy of your child's vaccination records or affidavit. Hearing & Vision Screening (This section to be completed for children ages 4-years-old and up.) Hearing Date \_\_\_\_\_ Signature \_\_\_\_\_ Hz 1000 2000 4000 Pass \_\_\_\_\_ R L Vision Date \_\_ Signature \_\_\_\_\_

Pass \_\_\_\_\_ Fail \_\_\_\_



### Discipline and Guidance Policy for Reading Friends

Discipline must be:

- 1. Individualized and consistent for each child.
- 2. Appropriate to the child's level of understanding.
- 3. Directed toward teaching the child acceptable behavior and self-control.

A caregiver may only use positive methods of discipline and guidance that encourage self-esteem, self-control, and self-direction, which include at least the following:

- 1. Using praise and encouragement of good behavior, instead of focusing only upon unacceptable behavior.
- 2. Reminding a child of behavior expectations daily by using clear, positive statements.
- 3. Redirecting behavior using positive statements.
- 4. Using brief supervised separation or time out from the group, when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age.

There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and quidance are prohibited:

- 1. Corporal punishment or threats of corporal punishment.
- 2. Punishment associated with food, naps, or toilet training.
- 3. Pinching, shaking, or biting a child.
- 4. Hitting a child with a hand or instrument.
- 5. Putting anything in or on a child's mouth.
- 6. Humiliating, ridiculing, rejecting, or yelling at a child.
- 7. Subjecting a child to harsh, abusive, or profane language.
- 8. Placing a child in a locked or dark room, bathroom, or closet with the door closed.
- 9. Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age.

Source: Texas Administrative Code, Title 40, Chapters 746 and 747, Subchapters L. Discipline and Guidance.

My signature verifies that I read and received a copy of this discipline and guidance policy.		
Signature		Date
Please Check One:	Employee/Caregiver	Household Member of Child-Care Home



### Photo Release Form

For valuable consideration acknowledged and received, the undersigned, as the parent or legal guardian of the person whose name appears at the bottom of this release ["Child"], hereby grants to Reading Friends © (the "Company") and the Company's successors, assigns, affiliates and licensees, the absolute, irrevocable, unrestricted, right to use, reproduce, publish, display, digitize, enhance, distort, alter, partition, or otherwise transform, in whole or in part, any and all likenesses of Child, including, without limitation, images, photos, pictures, and video recordings of Child, regardless of format, in which Child may be included with others (the "Likeness"), in any and all media now existing or hereafter created, including without limitation, multimedia. Further, the Company shall retain all right and title in and to the Likeness, including without limitation, any copyrights therein; provided, however, that the Company agrees that it shall not, at any time, without the prior written consent of the undersigned, use the name of Child in connection with the Likeness. In addition, the undersigned hereby transfers or waives or release any and all rights of restraint associated with the Likeness to the Company on a world-wide and unrestricted basis.

Permission for Use in Marketing. Pursuant to the terms described herein, by checking this box,
the undersigned agrees to allow Company to utilize the Likeness of the Child in any and all media
including marketing, advertising, website, social media, and other printed and/or online sources
for the Company. Reading Friends of Keller will seek additional approval for any media prior
to use.

The undersigned releases and discharges the Company, its affiliates, and their licensees from any and all claims and demands arising out of or in connection with the use of the Likeness, including without limitation any and all claims for libel or invasion of privacy and agrees not to sue or assert any claim against the Company, its affiliates, or any licensee of any nature whatsoever arising by reason of the Company's use of the Likeness as described in this release.

The undersigned is of full age and has the right to contract in Child's own name as parent or legal guardian of Child. The undersigned has read the foregoing and fully understands the contents thereof. This release shall be binding upon the Child, the undersigned, including heirs, legal representatives, and assigns thereof.

Witness Signature	Parent/Guardian Signature / Date Signed	
Phone Number	Address	
Child's Printed Name	City, State, Zip Code	



# **General Release Form**

I hereby certify that my son/daughter participate in the Preschool/Kindergarten prog	has my permission to gram at Reading Friends of Keller.
	n the activity in question and agree to hold them my son/daughter for any personal injury or illness
It is understood that this form must be signed the school office to be kept on file.	by his/her parent or guardian and be returned to
Parent or Guardian Signature	 Date
 Child's Printed Name	



## **Parent Contract**

l am enrolling my child		in Reading Friends of Keller. As the
parent	t whose signature appears below, I ag	ree to and understand the following:
YOU N	MUST INITIAL EACH SECTION BELO	W.
A.	upon enrollment of my child. Tuition is of if payment is received in the office after for withdrawal of absence, including extunrolled from school and any registration.	and supply fee plus the first month's tuition will be due due on the first of each month. A late fee will be charged the first of each month. No refund of tuition will be given ended vacations. Absence of tuition will render the child on fees must be paid again upon return. If you choose to en the months of January and May, you will be required the school year.
B.	Summer enrollment, which is a	a separate enrollment from the academic school year, ration and supply fee as well as a non-refundable tuition
C.	To meet the state of Texas guide information to be kept on file at the so affidavit must be completed and submit	elines, I must furnish current medical and immunization shool. If on an alternative vaccination schedule, a state tted to the office. I understand my child cannot attend ecomes sick during the school day, I will be notified and he school
D.	For the safety of my child, permis	ssion must be given by phone, email, or in person to the er than myself, or those named on my Admission Form,
E.	I understand that I am welcome to	o observe or visit the school anytime that I wish; however, avior must be in private by appointment. All conferences
F.	I understand that if I pick up my chand \$1.00 for each additional minute	hild 10 minutes after dismissal, I will be charged \$20.00 chereafter. Tuition is due on the first of each month. A ent is not received by the first of each month. Also, there
G.	I understand that if I intend to v	vithdraw my child before the end of the school year, a dvance. Failure to provide a 30-day notice will result in tuition.
studer	nt, but will not discriminate based u	the right to decline or withdraw enrollment to any pon such individual's race, color, religion, sex, or g below, you agree to the terms of this contract.
 Parent	t/Guardian Signature	 Date



### Parental Rights Policy for Reading Friends

#### A parent or guardian of a child at Reading Friends of Keller has the right to:

- (1) enter and examine the child care facility during the facility's hours of operation without advanced notice
- (2) review the child care facility's publicly accessible records
- (3) receive inspection reports for the child care facility and information about how to access the facility's online compliance history
- (4) obtain a copy of the child care facility's policies and procedures
- (5) review, at the request of the parent or guardian, the facility's: staff training records and any in-house staff training curriculum used by the facility
- (6) review the child care facility's written records concerning the parent's or guardian's child;
- (7) inspect any video recordings of an alleged incident of abuse or neglect involving the parent's or guardian's child, provided that: video recordings of the alleged incident are available, the parent or guardian of the child does not retain any part of the video recording depicting a child that is not their own, and the parent or guardian of any other child captured in the video recording receives written notice from the facility before allowing a parent to inspect a recording
- (8) have the child care facility comply with a court order preventing another parent or guardian from visiting or removing the parent's or guardian's child
- (9) be provided the contact information for the child care facility's local Child Care Regulation office;
- (10) file a complaint against the child care facility by contacting the local Child Care Regulation office; and
- (11) be free from any retaliatory action by the child care facility for exercising any of the parent's or guardian's rights.

I acknowledge I have received a written copy of my rights as a parent or guardian of a child enrolled at this facility.

Signature		Date
Please Check One:		
Parent	Employee/Caregiver	Household Member of Child-Care Home