



Jade School Age Day Camp Registration Form Session Year _____

Child's Full Name _____

Date of Birth ____/____/____

Child's Address _____

Child's School _____

Child's Teacher _____ Grade _____

Enrollment Information

Days needed- Enter approximate time of arrival and departure in boxes below

	Monday	Tuesday	Wednesday	Thursday	Friday
AM					
PM					

Please list any allergies or food restrictions your child has:

Please list any medications that your child takes on regular basis.

Any additional information you would like us to know about your child:

Getting To Know Your Child

Does your child have a nickname?

Who lives in the home with your child?

Does your child have siblings? _____ If yes, what are their names and ages?

Alternative Forms of Communication

At Jade we strive to build great communication between teachers and families. Please provide us with your contact information to ensure you get all necessary communication, in a way that best fits your family's needs. As always, informational postings will be found on the entrance door or on information bulletin board in the front lobby.

Please check your preference of communication:

Email:

Please print me a hard copy of
Monthly Newsletters, announcement etc.

CHILD INFORMATION RECORD

State of Michigan - Department of Licensing and Regulatory Affairs - Child Care Licensing

Instructions: Unless otherwise indicated, all requested information must be provided. If the information is not known or does not apply, "unknown" or "none" is the required response. A blank field, a line through a field or "N/A" are not acceptable responses.

For Provider Use Only:		Date of Admission	Date of Discharge	
Name of Child (Last, First, Middle Initial)				Child's Date of Birth
Address (Number and Street, Building/Apartment Number)		City	State	Zip Code
Father/Legal Guardian's Name		Home Phone ()	Mother/Legal Guardian's Name	
Home Address (if not child's address)		Cell Phone ()	Home Address (if not child's address)	
City	State	Zip Code	City	State
Email Address (optional)		Email Address (optional)		
Employer Name		Work Phone ()	Employer Name	
Name of Child's Physician or Health Clinic		Physician's or Health Clinic's Phone Number ()		
Hospital Preferred for Emergency Treatment (optional)				
Allergies, Special Needs and Special Instructions (Attach additional sheets, if necessary.)				

BCAL-3731 (Rev. 1 2011) Previous edition 7-12 only may be used.

See Reverse Side

Emergency Contact & Release of Child: List all individuals, including parents/legal guardians, in order of preference, to be contacted in an emergency. If possible, include at least one person other than the parents/legal guardians to be contacted in an emergency and to whom the child can be released. The second phone number column can be left blank. (If more individuals, attach additional sheets.)		
1.	()	()
2.	()	()
3.	()	()
Release of Child Only: List all individuals, other than the parents/legal guardians, to whom the child may be released. (If more individuals, attach additional sheets.)		
1.	()	2. ()
3.	()	4. ()

Parent/legal guardian must initial one of the following:

_____ I give permission to _____, licensed by the Department of Licensing and Regulatory Affairs to secure emergency medical and/or emergency surgical treatment for the above named minor child while in care.

_____ I do not give permission to _____, licensed by the Department of Licensing and Regulatory Affairs to secure emergency medical and/or emergency surgical treatment for the above named minor child while in care. I understand I assume responsibility for all emergency medical care.

Signature of Parent or Guardian	Date Signed
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Date Card Reviewed	Parent or Legal Guardian Initials	Date Card Reviewed	Parent or Legal Guardian Initials	Date Card Reviewed	Parent or Legal Guardian Initials	Date Card Reviewed	Parent or Legal Guardian Initials

LARA is an equal opportunity employer/program.
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AUTHORITY: 1973 PA 116
 COMPLETION: Required
 PENALTY: Rule Violation Citation.

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Jade School Age Day Camp Expectations and Guidelines

In Day Camp participants are expected to:

- Function in a 1:18 ratio
- Use the bathroom completely independently
- Be responsible for personal belongings and behavior
- Attend off-site field trips
- Show respect for others and their property
- Stay with the group at all times
- Function without a nap
- Display appropriate bus behavior
 - Fasten and tighten seatbelt and remain buckled for entire trip
 - Face forward and remain seated while the bus is in motion
 - Keep hands, feet, and personal items to yourself, keeping isles clear
 - Speak quietly and appropriately
 - Never play with windows or emergency exits
 - Collect personal items and trash at the end of the trip
 - Respect all Jade SADC transportation equipment

Jade SADC Guidelines

All participants are responsible to adhering to the following guidelines:

Show Respect at All Times For Each of the Following:

- Self
- Staff (both Jade SADC, Jade CDC, and Off-Site Staff)
- Adult and Parent Volunteers
- Other Jade SADC and Jade CDC Students
- Others at Off-Site Field Trips
- Personal Property
- Jade SADC and Jade CDC Property
- Off-Site Property

Conduct Yourself in a Safe Manner By Practicing the Following:

- Use Equipment Appropriately
- Walk Where Required
- Use Indoor Voice Where Required
- Refrain From Using Physical Violence Toward Self, Other Students, Staff
- Use Appropriate and Positive Language At All Times

Parent Signed _____

Student Signed _____



Jade School Age Day Camp Before & After School Information

Tuition

Before School Care \$15/Day

After School Care \$20/Day

\$115/Week for Both Before & After School Care

Tuition is charged for the days your child is scheduled regardless of school schedule or whether your child is present. Absence credits are available for use and are earned every six months. (One week's worth of scheduled days every six months, ex. three days registered=three absence credits every six months, full-timers receive five days). These credits may be used for illness, schools breaks, vacations, or days off. If your child will be out for more than two weeks you may disenroll and re-enroll. All disenrollment's require two weeks' notice. Tuition is due Friday by 6pm for the following week. A late fee of \$15 will automatically be charged if a payment is not made by Tuesday AM. Receipts are printed on Wednesday and reflect the charges for the upcoming week. Please place all payments in the black mailbox located in the lobby by the door.

Absences

If your child is absent or leaves school, you must contact Jade SADC by 2:30pm. Failure to do so will result in a \$10 fee added to your account. Our bus drivers want to assure your child is safe and accounted for and it is Jade SADC's policy to confirm your child's whereabouts before departing each school. Failure to notify us results in a delay in providing timely pick-up for all children on the bus.

School Breaks/Days Off/ Snow Days

Jade SADC offers Back-Up Care for all of these days. The charge is \$65 for full day and \$50 for half days. Active families just need to pay the difference from regularly charged tuition. Please let us know ASAP if your child will be attending any days off. **A NUT FREE LUNCH IS REQUIRED FOR ALL DAYS OFF AND HALF DAYS.**

Schedule

Please note that this schedule is subject to change to fit the needs of the center.

AM Schedule

5am: Jade SADC Center is open. Parents are required to park and walk their child into the building and to sign in each morning.

6:30am-7:15am: Breakfast is served. If you wish to have your child enjoy breakfast, **please arrive no later than 7:10am**. No outside food is permitted.

7:30am: Buses begin departure. **Please make sure that your child arrives on time to be signed in. All children must be signed in prior to departing on the bus. Buses cannot wait for tardy students. Please note that buses will depart 10 minutes early in inclement weather.**

***Please call Jade SADC at 734-397-0480 if your child will not be riding the bus.**

PM Schedule

2:30pm: Buses depart Jade SADC to schools. **If your child will not be riding the bus home, you must call by this time or there will be a \$10 fee added to your account. Schools do not notify Jade SADC of a child's absence.**

4:15-4:30pm: Buses arrive at Jade SADC. All students are checked in by Jade SADC Staff. **Parents must enter the building and sign out at pick-up.**

4:15pm-4:30pm: Snack is served. No outside food is permitted.

4:15pm-5:15pm: Homework Time/ Quiet Activities. Homework help is available, please let us know if you would like your child to complete homework here or at home.

5:15pm-6pm: Outside Time (weather permitting, on Jade CDC playground)/Inside Play Center Time

6pm-6:30pm: Dinner is served.

7pm: Jade SADC Center closes.

Jade School Age Day Camp

Before & After School Parent Information Acknowledgement

I have received the Before & After School Parent Information Sheet and understand the procedure and policy changes.

Print Name

Signature

Date

Child's Name



School Age Health Waiver

My child _____

(child's name)

Is in good physical condition and has no limitations *. His/her immunizations are up to date and on file with his/her school.

(parent signature)

(date)

*If there are limitations, please list below:

Parent Handbook Acknowledgement

I have received a copy, read, and understand the Jade Child Development Center Handbook. I further understand that any questions that I have regarding policies or procedures will be brought immediately to Management's attention.

I understand that information contained in this Handbook may be subject to change.

Parent/Guardian Signature_____

Date_____

Management Signature_____

Date_____

PARENT NOTIFICATION OF THE LICENSING NOTEBOOK

Child Care Organizations Act, 1973 Public Act 116

Michigan Department of Human Services

All child care centers must maintain a licensing notebook which includes all licensing inspection reports, special investigation reports and all related corrective action plans (CAP). The notebook must include all reports issued and CAPs developed on and after May 27, 2010 until the license is closed.

- This center maintains a licensing notebook of all licensing inspection reports, special investigation reports and all related corrective action plans.
- The notebook will be available to parents for review during regular business hours.
- Licensing inspection and special investigation reports from at least the past two years are available on the Bureau of Children and Adult Licensing website at www.michigan.gov/michildcare.

I have read the above statement issued by _____
Name of Child Care Center

Child(ren)'s Name(s) _____

Parent Name _____

Parent Signature _____ Date _____

Department of Human Services (DHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

I give Jade Child Development Center permission to use photographs of my child

(Child's name)

For the following purpose:
(Please check all that apply)

_____ In-House Documentation (photos posted in the classroom of activities)

_____ In-House Marketing (photos posted for potential families to see during tours, etc)

_____ Public Promotion (flyers, posters, newspaper ads, etc)

_____ I do not want my child's photo used for any of these

Parent Signature

Please Print Name