



Biscayne Park Schools Registration 2024 - 2025

Child's Name: _____

Check one:

____ New Applicant

____ Returning Student

Sibling of Biscayne Park Schools location: ____ Biscayne Park ____ Miami Shores

I am registering my child for the following location:

____ Biscayne Park ____ Miami Shores

Age by September 1st

Please select the time your child will be attending.

____ 12 - 17 months

____ 9 - 2 ____ 8 - 5:30

____ 18 - 23 months

____ 9 - 2 ____ 8 - 5:30

____ PK2, ____ PK3, ____ PK4

____ 9 - 2 ____ 8 - 5:30

Registration is not complete until the registration fee is paid. ____ **Parents Initial**

All children must be completely potty trained, with the exception of the one and two-year-olds. Any child three & over not potty trained will be charged an additional \$100 a month until they are potty trained. We understand children have accidents, but more than one a day is not typical once a child is potty trained. The school reserves the right to dismiss any student who does not meet the entrance requirements. ____ **Parents initial**

Current health forms are required to start school. If not replaced prior to expiration you child will not be allowed to return to school until the school has current forms.

____ **Parents initials**

BPS & BPS@MS does not discriminate against applicants and students on the basis of race, color, and national or ethnic origin. DCF license number C11MD2470 & C11MD3236



Enrollment Form

Child's Full Name: _____ Age: _____
(First) (Middle) Last

Preferred Name _____ Birthday _____ Gender: ___ Male ___ Female

Address Where Child Lives: _____

City _____ State _____ Zip Code _____

Parent Marital Status: Married _____ Separated _____ Divorced _____

Name of person with legal custody of child* _____

***In order to enforce custody issues, the school must have on file, copies of all legal documentation.**

Parent Information

Parent 1 Name _____ Cell Phone _____

Address _____ email: _____

Occupation _____ Employer _____ Business Phone _____

Parent 2 Name _____ Cell Phone _____

Occupation _____ Employer _____ Business Phone _____

Address if different from Parent 1 _____ email _____

Name of Siblings and ages: _____

Child's previous preschool experience: _____



Medical Information

Current health forms are required to start school

I hereby grant permission for the staff of this facility to contact the following medical personnel to obtain emergency medical care if warranted.

Doctor: _____ Phone: _____

Dentist: _____ Phone: _____

Hospital Preference: _____

List any allergies, special medical or dietary need, serious accidents, operations etc. that your child has had.

List all identifying birthmarks your child has by size and location (example: Mongolian birthmark).

Emergency Care Plan Instructions: including symptoms, medication, and notification in the event of an actual emergency ie. allergic reaction.

Please list special cares concerning your child (fears, likes, dislikes, etc.) or any other significant information, which would further contribute to a better understanding of your child and his/her needs.

SIGNATURE OF PARENT/GUARDIAN

DATE

Permission to use photo and share information with other families

☐ **YES** ☐ **NO** I give permission for BPS to use my child's picture on the school website, brochure, & school advertisements.

☐ **YES** ☐ **NO** You may share my home phone and/or email with my child's classmates family.

SIGNATURE OF PARENT/GUARDIAN

DATE



Emergency Contact Form

This form is very important to ensure the proper care of your child in the event of an emergency, this form must be filled out completely and accurately.

Child's Name: _____

Parent 1/Guardian Name: _____

Parent 2/ Guardian Name: _____

Child will be release only to the custodial parent or legal guardian and the persons listed below. _____ Parents initials

Authorized Pick-up

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

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

—

List individuals specifically not authorized to pick up your child from school:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

In cases of custody issues: The school must have copies on file of all legal documentation regarding custody issues for enforcement.

_____ **Parents initials**



Procedures & Policies

There is no reduction of fees for absences, vacations, school breaks, or closures due to natural disasters and/or pandemics such as COVID. _____ Parents initials

Tuition is based on an annual amount. We divide the payments up into 10 monthly equal payments for your convenience. _____ Parents initials

The monthly rate is not prorated based on the length of the month. _____ Parents Initials

Payments are due on the first of the month from August-May _____ Parents Initials

- All children are to be signed in and out using the Brightwheel app. Any authorized person picking up must have a valid picture ID with them to pick up.
- Late Fee pickup charges:
 - 9 - 2 you are late after 2:10 pm - \$15 per hour (This is the daily drop-in rate for after-school care).
 - 8:00 -5:30 you are late at 5:31 pm \$5 per minute until child is picked up.
- Morning Drop Off:
 - The school opens its doors at 8:55 for students to be dropped off. Prior to 8:55, children need to be in early arrival.
- Children must be kept home if they have a fever of 100 degrees or higher, vomiting, diarrhea, constant cough, wheezing, green runny nose, or contagious illness. Children can not return to school until they are fever-free without medicine for 24 hours. This policy is non-negotiable. _____ Parents initials
- ***It is at the Director's discretion to supersede a doctor's note allowing a student to return to school (i.e. HFMD no child can return with blisters that are not dried up). _____ Parents initials***
- No medication can be administered to a child without written authorization from a parent. All medication must be given to the office staff. ***I will not put medication in my child's lunchbox or backpack _____ Parents initials***
- **Biscayne Park Location** Our designated Emergency Evacuation relocation site is across the street in the church parking lot on 113th Street.
- **Miami Shores Location** Our designated Emergency Evacuation relocation site is located on the outside of the playground on Church property.
- In the event of an emergency, including off-site relocation, you will be notified via text message or the Brightwheel app.
- All children need a complete change of clothing, including shoes & socks, left at school in case of accidents. All items must be marked with the child's name.
- Children 12 months - 2-year-olds nap. ***Children in the 3-year-old and up class do not nap. All children in a 3-year-old class must be potty trained and cannot have pacifiers.*** If your child naps, bring a crib sheet, blanket, and any other item they need to help them sleep.
- ***No bottles are allowed. All children must use a thermos (preferred) or a sippy cup.***
- All bedding will be sent home Friday and returned Monday.
- The Director is to be notified one month in advance before a child is to be withdrawn. Parents are required to pay for that one month regardless of when the child leaves school.



Procedures & Policies cont'd

- All Tuition and Fees ARE NON REFUNDABLE _____ **Parents initials**
- Returned Check Fee \$50
- If after a reasonable period of time, a child is unable to adjust to the School, the School reserves the right to request withdrawal of the child. This decision is left to the discretion of the Director.
- Part-time spots are limited to 2 spots per classroom for budgetary reasons.
- Parents need to inform the school of changes in addresses, phone numbers, employment, emergency information, or any changes in family situations.
- It is a state mandatory requirement that current health forms are required to start school. If not replaced prior to expiration, your child cannot attend school until current forms are turned into the office. The reason for this policy is the school is fined by DCF for not having to date records.
- I hereby give my consent for child care personnel to have access to my child's records.

Parent Signature

Date

(Signature signifies acknowledgment and agreement to follow Policy & Procedures of School)



Policy on Discipline

In accordance with the state rule Section 65C-22.006(3) (C) 2., F.A.C., which requires child care facilities to notify parents in writing concerning the disciplinary practices used by the facility, the following policy applies:

To ensure a safe and successful program, discipline is a must. Our program will ensure that age-appropriate, constructive disciplinary practices are used for your child. This care will allow the child time to look over reflect upon his or her behavior. We will encourage children to choose alternatives to improper behavior.

The following steps will be used for behavior modification:

- Children will be corrected and asked to change their behavior.
- Children will be redirected from the situation.

The following practices are prohibited at Biscayne Park School & Early Learning Center

- Discipline that is severe, humiliating, or frightening.
- Discipline associated with food, rest, or toileting.
- Spanking or receiving any other form of physical punishment.
- Be denied active play as a consequence of misbehavior.

Signature of Parent/Guardian

Date



Acknowledgement of Receipt

Section 7.1 and 7.2, of the Child care Facility Handbook, requires a current physical examination (Form 3040) and immunization record (Form 680 or 681) within 30 days of enrollment. The parents or legal guardian's signature verifies compliance:

Section 7.3 of the Child Care Facility Handbook, requires that parents must receive a copy of the Child Care Facility Brochure, "KNOW YOUR CHILD'S DAYCARE FACILITY." The parent's or legal guardian's signature verifies receipt of the child care brochure.

Section 7.3 of the Child Care Facility Handbook, requires that parents are provided food and nutrition policies used by the childcare facility.

Section 2.8 of the Child Care Facility Handbook, requires that parents/guardians be notified in writing of the disciplinary and expulsion policies used by the childcare facility practices used by the childcare facility.

I HAVE READ AND WILL ABIDE BY THE BISCAYNE PARK SCHOOL & EARLY LEARNING CENTER PROCEDURES AND POLICIES.

Your signature below indicates that you have received the above items and information on the entire registration packet is complete and accurate. I hereby grant permission for the staff of this facility to have access to my child's records.

Child's Name: _____

Signature of Parent/Guardian

Date



Annual Tuition & Fees

2024 - 2025

Registration Fee	\$900 annually
Sibling Registration	\$800 annually

12 months - Pk 2, PK 3, & PK 4's

Hours	10 monthly payments (Aug. - May)
9:00 am - 2:00 pm	\$1295
8:00 am - 5:30 pm	\$1495 <small>Includes early arrival</small>

There is a total of 10 monthly payments.
Payments are due from the 1st to the 5th of every month.
The first monthly payment is due August 1st, and past due August 5th.
If not paid by August 5th, your child's spot will be given to a waitlist child.

ALL REGISTRATION & TUITION FEES ARE NON-REFUNDABLE

Early Arrival 8:00 am \$100 a month

Early Arrival Drop-in \$10 a day

Forms of payment accepted.

Cash, Zelle, & Brightwheel

Please note that there are fees associated with using Brightwheel. No fees are associated with Zelle

- To make payments with Brightwheel, Checks Bank Transfers (ACH): 0.6% – minimum fee of \$0.25 and a maximum of \$2, Credit/Debit Card: 2.95%
- To make payments with Zelle contact office for details

I have read and fully understand the above instructions regarding the rates and due dates.

There are 10 monthly payments a year. Payments are due from August through May.
The monthly rate is not prorated based on the length of the month.

All forms must be submitted with payment in order to be considered registered.

All payments and fees are non-refundable or transferable. A late fee of \$15 a day will be charged to your account after 5 days from the first day of each month. If a check is used and returned, you will be charged a returned check fee of \$50.

Signature of Parent/Guardian

Child's Name

Printed Name of Parent/Guardian

Date

Tuition & Fee Policies

Non-refundable Annual Registration Fee

- A \$900 annual registration fee is due with your enrollment packet for one child and \$900 for a sibling.
- You may break this fee up into two equal payments.

Payment Options

Two tuition payment options are offered.

- Full Year Payment by August 1st, with a 2 percent discount.
- 10 Monthly Payments
- The monthly rate is not prorated based on the length of the month _____ Parents Initials
- Payments are due by the 1st of each month beginning August 1st through May 1st _____ Parents Initials

Refund Policy

- Annual Registration and Tuition Fees are non-refundable.
- Tuition: Parents are responsible for all tuition, plus any additional charges such as early care, aftercare, and late payment & pickup fees.

Discounts

- A 5 percent reduction of the annual tuition is available when enrolling a second child. The discount will be taken off the lesser rate.

Tuition Payment Policy

- Tuition credit is not given for days absent, vacations, school breaks, natural disasters, or pandemics.
 - No portion of any fees is subject to adjustments or refunds because of absence, illness, natural disaster, pandemics, or withdrawals.
 - Tuition rates are subject to change yearly.
 - If your child is withdrawn before the end of the school year, you will still be responsible for the total annual tuition. _____ Parents Initials
- Part-time spots are limited to 2 per classroom for budgetary reasons.**

Delinquent Payments

- Tuition and all fees are past due if it is not paid by the 5th of each month. A late fee of \$15 a day will automatically be charged to your account after the 5th of the month.
- Children of parents who are considered delinquent after 15 days will no longer be able to attend school. _____ Parents Initials

I have read and fully understand the above instructions regarding tuition rates, registration fees and due dates. I agree to make the payments specified above. All forms must be submitted with payment in order to be considered registered.

Parents/Guardians agree that in the event of default in payment, they shall be responsible for all collection costs, including but not limited to agency costs, court costs, and reasonable attorney fees incurred by Biscayne Park Schools related thereto.

Signature of Parent/Guardian

Child's Name

Print Name of Parent/Guardian

Date



Child Day Care Licensing Alternate Nutrition Plan Agreement

Biscayne Park Schools (BPSELC & BPS@MS) is a nut-free environment. Any product made with nuts, peanut butter, tree nuts, or any other type of nut will be confiscated, and a nut-free snack will be given in its place. Also, any products that were made in a facility that used any nut products will also be confiscated.

Child's Name: _____
First **Last** **Age**

List any special dietary requirements: _____

I agree to abide by the following meals and snacks to meet my child's nutritional and dietary needs. Parents provide - Breakfast, snacks, lunch, dinner, evening snacks, and, when applicable, formula.

I understand and approve the use of the Alternate Nutrition Plan

Signature of Parent/Guardian

Date

We agree to provide the parent with a suggested meal pattern and menus and to discuss any problems which might develop in the use of the Alternate Nutrition Plan.

Signature of Owner/Operator

Date



POLICY FOR EXCLUSION OF ILL CHILDREN

1. Temperature over 100 Degrees:

Children can't return to school until they are fever-free and symptom-free for 24 hours without medication.

2. Behavior:

If a child looks or acts differently; awake all night and crying, unusually tired, pale, lack of appetite, irritable or restless.

3. Respiratory:

Breathing difficulties, e.g. wheezing

4. Vomiting:

More than usual infant "spitting up"

5. Diarrhea:

Is characterized by frequent watery bowel movements. If a child has more than 1 loose bowel movement, they will be sent home.

6. Rash:

Undiagnosed rash other than mild diaper rash.

7. Sore Throat:

A sore throat that needs culturing because other signs are present.

8. Eyes:

Redness, swelling, and/or discharge in the eyes.

9. Re-admittance to school for the following communicable diseases shall be:

a. Chickenpox - all lesions are dry and crusted.

b. Impetigo (blisters covered with honey-colored crusts) at least 48 hours after the start of medication and a Physician's note is required for re-admittance.

c. Conjunctivitis: pink eye - redness of eye with burning and thick purulent discharge) at least 24 hours after the start of medication and no drainage present. Physician's note required for re-admittance.

d. Lice and Scabies - No Nit Policy.

e. Pinworms - no restrictions following the start of treatment. Physician's note required for re-admittance.

f. Hepatitis - Physician's note required for re-admittance.

g. Strep Throat - return after 48 hours after the start of medication. Physician note required for re-admittance.

h. Hand, Foot, & Mouth - It is at the Director's discretion to supersede a doctor's note allowing a student to return to school (i.e. HFMD no child can return with blisters that are not dried up).

Signature of Parent/Guardian

Date



Probationary Agreement

Biscayne Park School & Early Learning Center believes in supporting and facilitating our students in every way possible in order for each individual to reach their full potential. It is with great pleasure to accept your child into our school. However, there is a minimum of ten-day Probationary Period where the students are evaluated, and a final decision is concluded. We reserve the right to extend the time frame beyond ten days at our discretion, which includes the dismissal of a student after the ten-day mark or beyond.

I have read and understand the Probationary Agreement of BPS&ELC School and agree to abide by this policy.

Signature of Parent/Guardian

Print Name



Expulsion & Suspension Policy

Name of Child: _____

Signature of Parent: _____

Unfortunately, there are sometimes reasons we have to ask that a child be removed from our program whether on a short term or permanent basis. We want you to know we will do everything possible to work with the family of the child in order to prevent this policy from being enforced.

WHEN A CHILD IS HAVING A PROBLEM IN THE CLASSROOM

- Staff will try to redirect the child from negative behavior.
- Staff will reassess the classroom environment, appropriateness of activities, and supervision.
- Staff will always use positive methods and language while disciplining children.
- Staff will praise appropriate behaviors.
- Staff will consistently apply consequences for rules.
- The child will be given verbal warnings.
- The child will be given time to regain control.
- The child's disruptive behavior will be documented and maintained confidentiality. Parent/Guardian will be notified.
- Parent/Guardian will be given written copies of the disruptive behaviors that might lead to expulsion.
- The Director, classroom staff, and parent/guardian will have a conference(s) to discuss how to promote positive behaviors.

Schedule for Expulsion or Suspension

If after the remedial actions above have not worked, the child's parent/guardian will be advised verbally and in writing about the child's or parent's behavior warranting an expulsion. An expulsion action is meant to be a period of time so that the parent/guardian may work on the child's behavior or to come to an agreement with the school.

The parent/guardian will be informed regarding the length of the suspension or expulsion. The parent/guardian will be informed about the expected behavioral changes required in order for the child to return to the school.

Parental Actions for Child's Expulsion

- Failure to pay /habitual lateness in payment.
- Failure to complete or get required forms including the child's immunization records.
- Verbal abuse to staff and/or school families on church or school property.
- Parent threatens physical or intimidating actions toward staff members or school families.
- Habitual tardiness when picking up your child.

Child's Actions for Expulsion

- Continual defiance of staff
- Continual lack of respect for staff
- Ongoing physical abuse to staff or children
- Verbal abuse of staff and children



Nut Policy

Biscayne Park School & Early Learning Center is a Nut Free Environment. Do not provide any nut products, this includes but not limited to the following:

- Peanuts
- Nuts of any kind
- Peanut butter
- Tree nuts
- Food made in a facility that may process nuts
- Foods that contain nuts

If your child brings any type of food that contains nuts they will not be allowed to eat it and we will replace it with something nut-free.

This practice has been implemented to address the needs of children who have a life-threatening allergy to nuts.

I have read and understand the nut-free policy of BPS&ELC and agree to abide by this policy.

Parent/Guardian Signature

Date



Participation in Food Related Activities

Child's Name: _____

To comply with Child Care Licensing and Enforcement Ordinance 65C-22.005(1)(c)2, parents and legal guardians of children attending BPS&ELC must be advised in advance that children may participate in food-related activities during the school year. Parent consent to participate in special occasion food events such as group snack provided by a parent, birthday celebrations, and/or similar events where food will be served, must be obtained in writing. Consent must also be obtained for children to participate in learning activities where food may be consumed, such as classroom cooking activities. Signed consent forms will be maintained in each child's file (one consent form must be completed for each child enrolled in the program).

____ Yes ____ No I give permission for my child to participate in classroom food-related learning activities such as cooking.

____ Yes ____ No I give permission for my child to participate in group snack events where food is provided by a parent following the guidelines of BPS&ELC.

____ Yes ____ No I give permission for my child to participate in special occasion food events such as birthday treats.

Print Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Date: _____

General Requirements

Every licensed child care facility must meet the minimum state child care licensing standards pursuant to s. 402.305, F.S., and ch. 65C-22, F.A.C., which include, but are not limited to, the following:

- Valid license posted for parents to see.
- All staff appropriately screened.
- Maintain appropriate transportation vehicles (if transportation is provided).
- Provide parents with written disciplinary practices used by the facility.
- Provide access to the facility during normal hours of operation.
- Maintain minimum staff-to-child ratios:

Age of Child	Child: Teacher Ratio
Infant	4:1
1 year old	6:1
2 year old	11:1
3 year old	15:1
4 year old	20:1
5 year old and up	25:1

Health Related Requirements

- Emergency procedures that include:
 - Posting Florida Abuse Hotline number along with other emergency numbers.
 - Staff trained in first aid and Infant/Child CPR on the premises at all times.
 - Fully stocked first aid kit.
 - A working fire extinguisher and documented monthly fire drills with children and staff.
- Medication and hazardous materials are inaccessible and out of children's reach.

Training Requirements

- 40-hour introductory child care training.
- 10-hour in-service training annually.
- 0.5 continuing education unit of approved training or 5 clock hours of training in early literacy and language development.
- Director Credential for all facility directors.

Food and Nutrition

- Post a meal and snack menu that provides daily nutritional needs of the children (if meals are provided).

Record Keeping

- Maintain accurate records that include:
 - Children's health exam/immunization record.
 - Medication records.
 - Enrollment information.
 - Personnel records.
 - Daily attendance.
 - Accidents and incidents.
 - Parental permission for field trips and administration of medications.

Physical Environment

- Maintain sufficient usable indoor floor space for playing, working, and napping.
- Provide space that is clean and free of litter and other hazards.
- Maintain sufficient lighting and inside temperatures.
- Equip with age and developmentally appropriate toys.
- Provide appropriate bathroom facilities and other furnishings.
- Provide isolation area for children who become ill.
- Practice proper hand washing, toileting, and diapering activities.

Quality Child Care

Quality child care offers healthy, social, and educational experiences under qualified supervision in a safe, nurturing, and stimulating environment. Children in these settings participate in daily, age-appropriate activities that help develop essential skills, build independence and instill self-respect. When evaluating the quality of a child care setting, the following indicators should be considered:

Quality Activities

- Are children initiated and teacher facilitated.
- Include social interchanges with all children.
- Are expressive including play, painting, drawing, story telling, music, dancing, and other varied activities.
- Include exercise and coordination development.
- Include free play and organized activities.
- Include opportunities for all children to read, be creative, explore, and problem-solve.

Quality Caregivers

- Are friendly and eager to care for children.
- Accept family cultural and ethnic differences.
- Are warm, understanding, encouraging, and responsive to each child's individual needs.
- Use a pleasant tone of voice and frequently hold, cuddle, and talk to the children.
- Help children manage their behavior in a positive, constructive, and non-threatening manner.
- Allow children to play alone or in small groups.
- Are attentive to and interact with the children.
- Provide stimulating, interesting, and educational activities.
- Demonstrate knowledge of social and emotional needs and developmental tasks for all children.
- Communicate with parents.

Quality Environments

- Are clean, safe, inviting, comfortable, child-friendly.
- Provide easy access to age-appropriate toys.
- Display children's activities and creations.
- Provide a safe and secure environment that fosters the growing independence of all children.



Parent's Role

A parent's role in quality child care is vital:

- Inquire about the qualifications and experience of child care staff, as well as staff turnover.
- Know the facility's policies and procedures.
- Communicate directly with caregivers.
- Visit and observe the facility.
- Participate in special activities, meetings, and conferences.
- Talk to your child about their daily experiences in child care.
- Arrange alternate care for their child when they are sick.
- Familiarize yourself with the child care standards used to license the child care facility.

More
information
and free
resources:

MyFLFamilies.com/ChildCare

This child care facility is licensed according to the minimum licensure standards included in section 402.305, Florida Statutes (F.S.), and Chapter 65C-22, Florida Administrative Code (F.A.C.).
License Number: BPS/C11MD2470 - MS/ C11MD3236
License Issued on 10/16/2023 BP 7/10/23 MS
License Expires on 10/15/2024 BP 7/9/24 MS
For more information regarding the compliance history of this child care provider, please visit:
MyFLFamilies.com/childcare



OFFICE OF CHILD CARE REGULATORY
AND BACKGROUND SCREENING
MYFLFAMILIES.COM

To report suspected or actual cases of child abuse or neglect, please call the Florida Abuse Hotline at 1-800-962-2873.

CF/PI 175-24, 03/2014

This brochure was created by the
Florida Department of Children and Families,
Office of Child Care Regulation and Background Screening



Know Your
Child Care
Facility

MyFLFamilies.com/ChildCare



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/>

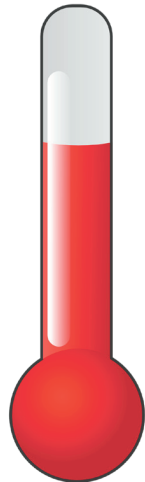


FACTS ABOUT HEATSTROKE:

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.

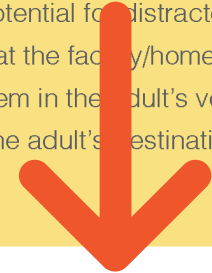


PREVENTION TIPS:

- 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:

Child's Name:

Date:

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

Rilya Wilson Act

Pursuant to s. 39.604, Florida Statutes, a child from birth to the age of school entry, who is under court-ordered protective supervision or in out-of-home care and is enrolled in an early education or child care program must attend the program 5 days a week unless the court grants an exemption. A child enrolled in an early education or child care program who meets the requirements of this act may not be withdrawn from the program without prior written approval of the Department or community-based care lead agency. If a child covered by this act is absent, the program shall report any unexcused absence or seven excused absences to the Department or the community-based care lead agency by the end of the business day following the unexcused absence or seventh consecutive excused absence.

Educational stability and transition are key components of this act to minimize disruptions, secure attachments and maintain stable relationships with supportive caregivers of children from birth to school age. Successful partnerships are imperative to ensure that these attachments are not disrupted due to placement in out-of-home care or subsequent changes in out-of-home placement. A child must be allowed to remain in the child care or early education setting that he/she attended before entry into out-of-home care, unless the program is not in the best interest of the child. If a child from birth to school-age leaves a child care or early education program, a transition plan needs to be developed that involves cooperation and sharing of information among all persons involved, respects the child's developmental stage and associated psychological needs, and allows for a gradual transition from one setting to another.

This law provides priority for child care services for specified children who are at risk of abuse, neglect, or abandonment. These children are also known as Protective Services children.

Rilya Wilson Act Requirements:

- ✓ Protective services children **MUST** be enrolled to participate 5 days per week.
- ✓ Protective services children **MAY NOT** be withdrawn without prior written approval from the Department of Children and Families (DCF) or Community Based Care (CBC).
- ✓ If a Protective Services child has 7 consecutive excused or any unexcused absence, the child care provider **MUST** notify the appropriate community based care staff.
- ✓ The Department and child care providers **MUST** follow local protocols set up by the CBC to ensure continuity.
- ✓ If it is not in the best interest of the child to remain at the child care or early education program, the caregiver **MUST** work with the Case Manager, Guardian Ad Litem, child care and educational staff, and educational surrogate, if one has been appointed, to determine the best setting for the child.

Community-Based Care Lead Agencies Contact Information:

<http://www.dcf.state.fl.us/programs/cbc/docs/leadagencycontacts.pdf>

**** If you have concerns regarding any child that you may care for, please contact the Florida Abuse Hotline at 1-800-96-ABUSE****

My signature below verifies receipt of the Flyer on the Rilya Wilson Act from the Department of Children and Families.

Name: _____

Child's Name: _____

Date Received: _____

Signature: _____

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

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Participation in Enrichment Activities

I hereby give permission for my child _____
to participate in Music Class, Cooking Class, Yoga,
Little Athletes, Soccer, and Ballet provided by a child
service enrichment provider of the school's choice.

Signature of Parent/Guardian

Date

New families download & email completed registration packet to
s.busta@bpselc.com

Families currently enrolled, please upload completed registration packet to
Brightwheel