



A MOTHERS LOVE
FAMILY CHILD CARE

**PARENT
HANDBOOK**

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AMOTHERSLOVEFCC.COM

Welcome to A Mothers Love Family Child Care!

We are delighted that you have chosen our child care center to provide for the needs of your child. You and your family are encouraged to visit our center prior to the first day of enrollment to give our teachers, and your child, an opportunity to meet and become better acquainted. It will make separating on the first day a bit easier.

The Parent Handbook has been written to describe our program, philosophy, policies, and all the practical details that go into making each day as happy and successful as possible. Please carefully read this handbook and keep it for future reference. The staff at A Mothers Love would be glad to address any of your questions or concerns.

Once again, welcome!

We Believe Children...

- Must receive care from adults who are capable and caring.
- Should experience numerous positive learning milestones.
- Children's play is extremely vital to healthy physical development, social skills, and cognitive growth.
- Should be carefully guided from one developmental level to another.

We provide the very best care for your blooming flowers. This is the time to strengthen social, emotional, physical, and intellectual development. During this time, we understand that much attention and patience is needed to develop bonds. That is why we partner with our parents to create a community that can support these areas of development and needs of each child both at home and at our facility. Individual interaction throughout the day is given to promote learning and physical development. We focus on learning through story telling, singing, music and movement, puppet play, as well as arts and craft are just a few ways we try to stimulate their senses.

We have a well planned program with organized activities, active play, circle time, music and movement, outside activities, and so much more. We provided the right balance of teacher lead/child initiated activities to allow children of all ages to succeed and develop socially, emotionally, physically, and intellectually. Our staff genuinely care about each individual child's needs and learning styles. We take the time to help them discover his or her way.

Our curriculum addresses the needs of each individual child centered on 5 learning domains:

Social Development	Emotional Development	Gross & Motor Skills
Cognitive Development		Language Development

Our children are empowered to make choices that will help them to develop individuality and positive self-esteem. Our curriculum not only meets but exceeds state kindergarten standards. Although our program is tailored to meet the needs of the individual child, every child will leave with the knowledge of:

Fine Motor Skills	Gross Motor Skills	Listening Skills	Social Skills
Language Skills	Colors, Shapes & Objects	Numbers & Counting	Letters Recognition
Sight Word Recognition	Sound Recognition	Basic Reading Skills	Basic Math Skills

ENROLLMENT AND TUITION

Children between the ages 6 weeks and twelve years are eligible for enrollment at A Mothers Love Family Child Care. Children may attend the center for a 10 hour block between 6:00 a.m. and 6:00 p.m., Monday through Friday. Parent(s) is/are required to pay a one week's non-refundable deposit prior to enrollment.

Documents to be completed and returned before enrollment are:

- Child Enrollment Form
- Child Information Record
- Health Appraisal
- Parents Rights Policy Agreement
- Infant/Toddler Supplemental Information Form (if applicable)

A 10% discount is offered to families with more than one child enrolled. This applies to full-time enrollment only.

The registration fee of \$150 is due once the director has assigned the child a start date. This is a one-time, non-refundable charge per year. If a child is withdrawn then re-enrolls at a later date, a second enrollment fee will be expected.

PAYMENT POLICY

To guarantee a position for your child, payment must be received by 5:30 pm on Thursday for the following week. Tuition is paid for 52 weeks of the entire year even if your child may be absent due to illness, family emergencies, doctor visits, hospitalizations, vacations, or any other reason. Please note that tuition rates do not change in the event of a week including a holiday.

After extensive research, we have found our policy to be consistent with other facilities and child day care centers. Because our costs remain the same throughout the year, we rely on the specified tuition to be paid each week in order to meet our expenses. Consequently, as much as we might like to, we cannot make allowance for any days missed in your regular attendance schedule. There will be no credit for missed days. This includes emergency closure due to natural disasters and/or pandemics.

We do not trade a scheduled day for another day. Parents may request an added day or extended hours to a day. We will check our schedule and will let you know if an opening is available.

Parents who are receiving Crystal Stairs or any care assistance must pay the full regular tuition rate until the authorizing paperwork is delivered to us. Upon our receipt of care assistance payment, your account will be credited towards the following month. You are responsible to directly pay us your care assistance co-pay each month. Rate may vary according to disbursement. If your are assistance billing

lapses it is your responsibility to pay the full tuition amount until they notify us otherwise.

A Mothers Love used KidKare.com for billing and payments online. If paying by credit card a transaction fee will apply. If you are paying using your bank account, there are no transaction fees. Please visit Kidcare.com to review their payment policies and well as terms.

FEES

A \$10/day fee is charged for late tuition payment. In the case of non-payment, parent will be responsible for all collection costs and all small claim court costs. Special payment arrangements may be made in advance with the director.

All parents must oblige to their contracted scheduled hours. A Mothers Love Family Child Care is a provider for working parents only. If you have shopping or personal business, please pick up your child prior to running errands. There is a late fee of \$15 per 15 minutes or fraction thereof (eg. 1-15 min. late=\$15, 16-30 min. late=\$30, etc). Late fees are due prior to the next business day.

TERMINATION OF ENROLLMENT

A two-week written notice prior to termination is required before withdrawing a child from our child care. Account must be paid in full before withdrawing—including your child's tuition for that two-week period.

The director at A Mothers Love reserves the right to cancel the enrollment of a child at his/her discretion, or for the following possible reasons:

- Non-payment or excessive late payments of tuition and fees.
- Not observing the rules of the center as outlined in the parent agreement.
- Child has special needs that we cannot adequately meet with our current staff.
- Physical and/or verbal abuse of staff or children by parent or child.
- Expired or non-immunizations and/or physical.

MYPROCARE

Your child's records are located at a secure site on MyProcure.com. The best way to access this link is from the home page of our website (amotherslovefcc.com). Parents are encouraged to check their child's site frequently to view tuition status. It is the parent's responsibility to check MyProcure.com for their current tuition amount. Contact the office to receive your Welcome Letter. You will log on to MyProcure.com to receive you confirmation code and login information. Parents without Internet connection will receive "hard copies" of tuition statements and center communications. Inform the director if you need to be placed on our Parent Print-Out List.

COMMUNICATION

Communication is an important factor in running a smooth daycare, creating stability for your child and giving you a peace of mind that your child is receiving the best possible care. If any major changes take place in your child's life (eg. divorce, death of a loved one, changes in eating or sleeping patterns, etc.) please keep me informed. Your information will be kept confidential. If your child has any allergies, handicaps or any other special needs, please provide written instructions so I may be better educated on how to care for your child.

Our staff will be sending home information on a regular basis to make sure you are up to date with any changes in our facility or with your child. As well as alerting parents by text and/or email.

You are welcome to call to arrange a meeting with the director or staff--even just to become better acquainted! We can cover any concerns about any aspect of our program, or your child's care, may be expressed to the director.

Remember to communicate in writing any changes in your child's schedule. We must be informed, in writing, regarding any changes in the person picking up your child. A copy of their drivers license must be submitted to us prior to them picking up your child. You may add or delete names of authorized adults allowed to pick-up your child on the Child Information Record.

Our facility must be informed of any of the following changes:

- address and/or phone numbers, or e-mail address
- parent/guardian employment,
- health/immunizations up-dates, or;
- other pertinent information related to your child.

DROP-OFF AND PICK-UP POLICIES

Parents are expected to accompany their child into the facility and sign each child in. When picking up your child, an adult must come into our facility to sign out each child. The child can not leave our facility without a parent, guardian, or authorized person's signature. Parents are expected to assume full responsibility of their child once they enter the facility.

Only the individuals listed on the Child Information Record, or on a written permission note from the parent, will be allowed to leave with a child. The staff is expected to request a picture I.D. from any unfamiliar person (including grandparents). If there is any concern, the staff of A Mothers Love reserves the right to deny a person's request to pick-up a child.

Your child has waited all day to see you and is excited when you walk in the door. At pick up please put away your cell phone and give your full attention to your child.

CUSTODY ORDERS

Until custody has been established by a court action, one parent may not limit the other from picking-up a child in our care. The center must be notified immediately of any changes in custody orders. Certified custody orders must be given to the center director.

HOLIDAYS

A Mothers Love Family Child Care will be closed on the following holidays: New Year's Day, Martin Luther King Jr. Day, President's Day, Memorial Day, The week of Independence Day, Labor Day, Veteran's Day, The week of Thanksgiving, and Christmas Day. On Christmas Eve and New Years Eve we close at 12:30pm. If any of the above holidays fall on a weekend, the closest Friday or Monday will be selected.

**I may take up to three weeks (15 days) paid vacation/personal/sick days off.*

**Per this contract, your regular tuition is due prior to your vacation time and likewise, regular tuition is due prior to attendance.*

UNEXPECTED CLOSINGS

On a rare occasion our facility may be forced to close due to a situation beyond our control (e.g., earthquake, electrical outage, no water service). Every attempt will be made to inform parents of an emergency closing.

CHILD ABUSE AND NEGLECT

Staff members are required by law to report any suspected child abuse or neglect.

CLOTHING

Because of the wide range of activities it is recommended that children be dressed in washable, comfortable clothing. Plastic aprons will be provided by the facility for art and water activities.

Water activities, sand play, and occasional bathroom accidents necessitate that an extra set of clothing be kept at the facility at all times. All extra clothing should be marked with the child's name and placed in a labeled plastic bag which will be put in their personal cubby. Clothing should include underwear, socks, pants, and shirt. If wet or dirty clothes are sent home, please return a clean extra set of clothes the next morning.

Licensing requires that children be taken outdoors each day. The children will play outdoors as long as the temperature and weather permits. Children should be dressed according to the weather. An extra sweater or sweatshirt at school is recommended for sudden changes in temperature. All clothing, including coats and boots, must be labeled clearly with your child's name.

DIAPERS & TOILET TRAINING

Parents supply all diapers and wipes at A Mothers Love unless the parent makes alternate arrangements with the director.

Our teachers are experienced in training young children in how to use the bathroom. It is essential that the parent and teacher communicate about the needs of the child and work together to make this developmental milestone positive and successful.

We recommend that when in training, your child be dressed in "user-friendly" clothing. Overalls, zippers, and snaps are difficult for small children to manage--especially in a hurry! While toilet training, parents are to provide lots of thick training underwear, socks, and outer clothing. We do not allow the use of "pull-ups" while training. They seem to only delay the toilet training process plus require extra time to change.

BODIES AND BOUNDARIES

There is a natural curiosity among children with regards to their bodies. When situations arise where we have to speak to children about body parts we use the anatomically correct terms. We also teach children that every person has boundaries and that our bodies are private and should be respected. Parents will be notified if situations occur in the classroom that directly affects their child(ren).

FIELD TRIPS

Field trips and nature walks are considered an important part of the educational program and will be taken periodically. The center will provide the same adequate responsible adult supervision for these excursions as is provided children while in attendance at the center. Your permission for your child to participate in walking excursions is part of this agreement. You will be notified of all field trips.

We will occasionally take classroom field trips to museums, parks, apple orchards, and other community places. Families will be notified prior to any trips involving transportation. A permission slip must be signed and returned--including emergency phone numbers for that day. Parent volunteers are welcome to assist with field trips (and other special events). A child may be excluded from participation in a field trip for safety, health, or disciplinary reasons.

BIRTHDAY CELEBRATIONS

Parents are welcome to send in a treat to share with the children in our facility on birthdays or special occasions. Inform your child's teacher in advance about what kind of treat you plan on bringing. This is for the safety of all of the children. Ask the staff for suggestions. Parents are always welcome at their child's birthday celebration.

If a birthday is to be celebrated away from school and the entire class is not invited, please mail the invitations. If the entire class is invited, you may distribute the invitations into the cubbies. Our facility will not distribute mailing lists or phone numbers.

PHOTOGRAPHS AND PUBLICITY

Photographs of the children in our programs may be taken from time to time and may appear in magazines, brochures, publicity materials and/or educational trainings. Your

permission for photographs of your child, to be used without compensation, is part of this agreement.

MEALS, SNACKS AND FOOD ALLERGIES

The facility will provide milk for lunch and two snacks with water for each day. Parents will provide formula or breast milk for children up to the age of 12 months. A Mothers Love will provide whole vitamin D milk for children between the ages of 12 and 24 months. 1% milk will be provided for children from 25 months to 12 years of age. If there are dietary needs, or allergies, it is the parent's responsibility to notify the facility director. Parents will need to supply any special foods required. An Allergy Action Plan and a Medical Action Plan must be filled out if a child has an allergy or medical need.

Parents have the option to send the child with lunch or the child can consume the food prepared at the facility. Arrangements for lunch should be made with the director to ensure there is enough food for each child. Lunches sent from home should be self-serving or easy to serve and clearly labeled. A microwave will be available. Lunch boxes that have a frozen pack inside are recommended.

A Mothers Love offers a hot lunch option depending upon the demand. Check with the director for options. Hot lunch is purchased by the month according to a set weekly schedule. No refunds for missed days unless 24 hour notice is given directly to the office.

Breakfast is provided for children whose arrival time is before 8:00 a.m. If you are sending your child with breakfast we ask that it be simple and self-serving (e.g., yogurt, breakfast bar, dry cereal, fruit).

HEALTHY CHOICES

While the occasional donut, chocolate milk, and fruit snacks make for a good treat they do not necessarily make a healthy meal. We ask that parents reserve these items for special occasions. Bringing in these items on a daily basis for their child does not encourage healthy eating patterns. We are happy to provide parents with a list of healthy, fun, alternatives upon request.

IMMUNIZATIONS AND PHYSICALS

All children who attend child care programs in California are required by law to be vaccinated. A Mothers Love requires all children enrolled in the program to be immunized. A Health Appraisal form is required prior to enrollment. This form requests a record of your child's immunizations and date of last physical examination.

*Important: It is your responsibility as parent or guardian, to maintain up-to-date immunizations and physicals for your child(ren). Updates must be reported to the director in writing.

A Health Appraisal record of your child's physical exam must be submitted and is also a requirement by the California Department of Health. A pediatrician or family doctor must

sign and date this form. A new letter must be signed yearly.

Wellness Policy

You are the best judge of your child's health and we trust you will not bring a sick child to the center. A Mothers Love is a 'well baby' daycare. Per State Licensing and CDC regulations, if your child has any of the symptoms below, he/she **MUST** stay home, as to not infect other children in my care, the staff or myself.

The following symptoms should help you determine if your child should stay home:

- Fever of 99 degrees or above
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose (see "allergy related" notes below)
- Nausea or vomiting
- Diarrhea (more than two loose, watery stools)
- Rash or skin infection (eg. Poison oak with drainage, impetigo, ringworm, lice) or communicable disease (measles, rosella, rubella, mumps or chicken pox)

If your child is ill with any of these symptoms, they will need to stay home for 72 hours. Once they are FREE of symptom without the assistance of medication they can return.

However, if while in our care your child shows signs of these symptoms or becomes ill, displays an unknown rash, or acts out-of-character we will isolate them to a designated area in the facility and you will be called to come take your child home. When called, due to the Covid19 pandemic, it is crucial that you (or an alternate emergency person) pick up your child within ½ hour. We request that you have a back up person whom you or I may contact if your place of work is out of ½ hour radius from my facility. This is to protect the health of your child and his/her classmates. Your cooperation is greatly appreciated. If your child is too ill to play outside with his or her class, or participate in regular classroom activities, then your child is too ill to attend childcare.

It is mandatory to communicate with me ANY symptoms your child experiences, even if you feel it is minimal.

****It will be at my discretion as to whether a child may or may not be in my care if they show any signs of illness. This supersedes Doctor's notices.**

Failure to report to me any illnesses or sending a child to my care with knowledge of signs of illness without reporting to me will result in termination of our contract immediately.

Consideration will be taken if your child is allergic to certain

food/drink products or on medication.

Medicine

It is of vital importance to strictly adhere to my sick policy. If you administer medication before sending child to my care, you must report this to me and the reasons for giving your child medication. If they are not well enough to come to my facility without the assistance of medication (except allergy medicine) then they should not be present around other children, my staff or myself.

Non-prescriptive medication (Tylenol, nose drops, etc.) as well as prescription medication will only be administered after a parent signs, and dates a form entitled, Medication Permission. The parent must provide all medications.

Prescription medication must be in the original container and labeled with the child's name. A parent or guardian must administer the first dosage under their supervision; never the facilities staff. We will not administer cold medications to any child.

Staff cannot administer medication (prescription or over-the-counter) without the proper dosage for that child listed on the container. If the container reads, "Consult/see Doctor" then a note from the doctor with the child's weight, and the dosage recommended, must be provided.

A Non-Prescription Release form for other applications such as diaper wipes, sun block, soap, etc. will be signed upon enrollment.

Injuries and Accidents

Every consideration will be taken to ensure the safety of your child while in our care. If your child should receive a bruise, scratch or bump from a simple accident, we will do our best to explain verbally what occurred. Should an injury occur, a Minor Incident Report would be completed. A copy of this report will be sent home to be signed by the parent and by the Director. A parent or guardian will be notified regarding any injury that occurs while your child is in our care.

In the event of a major medical emergency or accident, while in our care the director will call 911 first. The child will be transported to the hospital noted on the Child Information Record (or the closest hospital). The parent/guardian will be called immediately.

Family Gatherings

A Mothers Love families have a chance to meet with other families and the teachers several times a year. These gatherings are meant to provide a sense of community and to celebrate the families here at A Mothers Love. Dates and times will be sent home with the child as well as being emailed/text messaged when needed.

Changes in Policies

The fees, procedures, and policies stated in this handbook are subject to be changed at the discretion of the director. This A Mothers Love Parent Handbook Revised: June 2020.

We would be glad to discuss any of our policies with you at any time. This contract is subject to change with two weeks written notice.

Discipline and Guidance Policy

At A Mothers Love we believe that discipline is necessary for the welfare of the child as well as for the entire childcare. Discipline is a means of teaching and instilling in each a sense of right and wrong. Developing character traits that we feel are consistent with the child's ongoing growth objective.

It's our desire to give the child, every child a chance to grow to be responsible and self-directing. We do not expect perfection from any child, and we try to deal with problems by letting the child develop his/her own reasoning power and experience satisfaction in his/her own decisions. Consequently, discipline is maintained, which is firm and consistent, yet tempered with kindness, love and genuine regard for the child. A positive approach finds what is good rather than concentrating on what is not.

Conferences will be scheduled with parents if particular disciplinary problems occur. If a child's behavior consistently endangers the safety of the staff as well as children around him/her, then the Director has the right, after meeting with the parents and documenting behavior problems and interventions, to terminate child care services for that particular child.

Note: If, at any point, there is an indication/suspicion that a child may have special needs, A Mothers Love will inform the child's family for assessment and assistance.

NOTE: Corporal punishment will not be allowed. This is defined as the use of negative physical touching (spanking, slapping, pinching, etc.), exclusion from large motor or outdoor activities, or exclusion from any learning activity. No unusual punishment will be allowed such as humiliation, ridicule, threat, or coercion.

ENROLLMENT CONTRACT

Please carefully fill out and return this form to the director.



I, _____, have read A Mothers Love Family Child Care Parent Handbook and agree to comply with all terms, policies and procedures therein.

I agree to pay the following tuition amount and understand that these may change depending on schedule and rate adjustments during the course of enrollment.

Starting Tuition_____

Registration Fee paid on _____ Approved Start Date _____

I will begin bringing my child, _____ to A Mothers Love Family Child Care on _____ (date).

My schedule will be:

Monday: ___ am - ___ pm

Tuesday: ___ am - ___ pm

Wednesday: ___ am - ___ pm

Thursday : ___ am - ___ pm

Friday: ___ am - ___ pm

Parent/Guardian Signature

Date

ENROLLMENT CONTRACT CONTINUED

Please carefully fill out and return this form to the director.



Please Initial next to each statement:

_____ **Registration Fee:** I understand that an annual nonrefundable fee of \$_____ or a family (more than 1 child) registration of \$_____ shall be paid in advanced to enroll my child, I understand that I may guarantee my child's enrollment for fall by paying this fee no later than July each year. In instance of agency reimbursements, the registration fee is to be paid according to the applicable contract.

_____ **Payment of Tuition:** I understand that I'm solely responsible for any tuition that is due. Tuition is due and payable, on the first scheduled day of attendance each week. If full payment is not received when agreed upon a late fee of \$25.00 per week will apply. I also understand that if my account is delinquent for more than two weeks, I will be asks to remove my child from the program until my account is brought to current. I understand that the childcare cannot guarantee a spot will be held when a child is withdrawn from the program for any tuition that is due.

_____ **Tuition and Modification Conditions:** \$_____ is the current tuition rate for the program I have chosen. I understand that the rates are subject to change with reasonable notice of withdrawal. However, I understand that the registration fee will not be refunded.

_____ **Agency Reimbursement:** I understand that I am solely responsible for any tuition payments and late fees in excess of any agency or third-party reimbursement in accordance with the applicable contract. I also understand that I am solely responsible for promptly communication any changes in my status that would affect my agency reimbursements, and that I am responsible for payment to A mother's love for any tuition that excess of any agency or third-party reimbursement resulting from my failure to promptly and accurately communicate status changes.

_____ **Daily Sign In and Out:** I agree to sign my child(ren) in and out every day. I understand that my child is not permitted to sign him/herself out. I understand that I am required to enter the childcare to drop off and pick up my child(ren). I understand that I am required to include the time and sign with a full signature.

_____ **Withdraw From Program:** I understand that I must provide a two (2) week notice of withdrawal from the program. If this notification is not provided, I agree to pay all tuition and fees for two (2) weeks, whether my child attends or not. I understand that when my child is withdrawn s/he will only be eligible for re-admission based upon space availability and all other enrollment criteria. If my child is selected for re-enrollment, I will be required to pay a new non-refundable registration fee. If there is an outstanding balance (including tuition or fees) when my child was withdrawn, I will be required to bring my account current prior to completing a re-enrollment application. I understand all fees (tuition, registration or activities) are non-refundable.

_____ **Holidays and Closure's:** I understand that the childcare is closed on the following holidays; New Year's Day, Martin Luther King Jr. Day, President's Day, Memorial Day, The week of Independence Day, Labor Day, Veteran's Day, The week of Thanksgiving, and Christmas Day. On Christmas Eve and New Years Eve we close at 12:30pm. I agree that I will not receive a refund, credit or any other allowance for holidays. If a holiday falls on a weekend, it will be observed on either the proceeding Friday or the following Monday.

Parent/Guardian Signature

Date

CHILD PROFILE

Please carefully fill out and return this form to the director.



Name: _____ Age: _____ Date: _____

You know your child better than anyone else in the world! You have observed your child on a day-to-day basis and are uniquely qualified to share your insight about your child's development with us. Please take a moment to complete this profile, as the information will help us know your child better and to meet his or her individual needs.

1. With whom does the child reside? Please list names and relationships to child, and names and ages of other children:

ADULTS: Name: _____ Relationship: _____
Name: _____ Relationship: _____
Name: _____ Relationship: _____
CHILDREN: Name: _____ Age: _____
Name: _____ Age: _____
Name: _____ Age: _____

2. Who also cares for your child(ren)? _____

3. What language is spoken in your home? _____

4. When did your child begin speaking or using words? _____

5. What would you like most for your child to experience with us? _____

6. How would you describe your child (personality characteristics)? _____

7. What do you enjoy the most about your child? _____

8. What are your child's play interests (preference for creative, dramatic, or construction play)? _____

9. How does your child express frustration? _____

10. Does your child have any particular fears? _____

11. How does your child react to change (such as being left by parents)? _____

12. How does your child comfort himself/herself? _____

13. How do you discipline your child? _____

14. What are the foods your child likes best? _____

Least? _____

15. What are your child's mealtime routines at home? _____

16. How many hours of sleep does your child receive at night? _____

17. Does your child need to be awakened in the morning to attend the school? _____

18. What are your child's sleeping arrangements? Check appropriate answer.

Own room Shares room with _____ Sleeps in crib Sleeps in bed

AFFIDAVIT REGARDING LIABILITY INSURANCE FOR FAMILY CHILD CARE HOME

SECTION A:

I/We, the parent(s)/guardian(s) of _____
 (Child's Name)
 acknowledge that _____
 (Licensee's Name)
 the licensee of _____
 (Name of Family Child Care Home)
 has informed me/us that this facility does not carry liability insurance or a bond in accordance with standards established by Family Child Care statute.

SECTION B: To be completed only if licensee does not own premises or the licensee is a member of a condominium or Homeowner's Association.

I/We, the parent(s)/guardian(s) of _____
 (Child's Name)
 acknowledge that _____
 (Licensee's Name)
 the licensee of _____
 (Name of Family Child Care Home)
 has informed me/us that she/he does not own the premises or is a member of a condominium or Homeowner's Association, and the liability insurance, if any, of the owner/Homeowners' Association may not provide coverage for losses arising out of, or in connection with, the operation of the family child care home, except to the extent that the losses are caused by, or result from, an action or omission by the owner/Homeowners' Association, for which the owner/Homeowners' Association would otherwise be liable under the law.

Signature of Parent(s)/Guardian(s)

Date

NOTE: The law requires Family Child Care providers to carry liability insurance or bond in the amount of \$300,000 annually or to maintain this signed statement in the facility file. Lack of a bond or insurance does not effect the right of parents to bring legal action against the facility.

CHILD CARE CENTER NOTIFICATION OF PARENTS' RIGHTS

PARENTS' RIGHTS

As a Parent/Authorized Representative, you have the right to:

1. Enter and inspect the child care center without advance notice whenever children are in care.
2. File a complaint against the licensee with the licensing office and review the licensee's public file kept by the licensing office.
3. Review, at the child care center, reports of licensing visits and substantiated complaints against the licensee made during the last three years.
4. Complain to the licensing office and inspect the child care center without discrimination or retaliation against you or your child.
5. Request in writing that a parent not be allowed to visit your child or take your child from the child care center, provided you have shown a certified copy of a court order.
6. Receive from the licensee the name, address and telephone number of the local licensing office.

Licensing Office Name: _____

Licensing Office Address: _____

Licensing Office Telephone #: _____

7. Be informed by the licensee, upon request, of the name and type of association to the child care center for any adult who has been granted a criminal record exemption, and that the name of the person may also be obtained by contacting the local licensing office.
8. Receive, from the licensee, the Caregiver Background Check Process form.

NOTE: CALIFORNIA STATE LAW PROVIDES THAT THE LICENSEE MAY DENY ACCESS TO THE CHILD CARE CENTER TO A PARENT/AUTHORIZED REPRESENTATIVE IF THE BEHAVIOR OF THE PARENT/AUTHORIZED REPRESENTATIVE POSES A RISK TO CHILDREN IN CARE.

For the Department of Justice "Registered Sex Offender" database, go to www.meganslaw.ca.gov

LIC 995 (9/08)

(Detach Here - Give Upper Portion to Parents)

ACKNOWLEDGEMENT OF NOTIFICATION OF PARENTS' RIGHTS (Parent/Authorized Representative Signature Required)

I, the parent/authorized representative of _____, have received a copy of the "CHILD CARE CENTER NOTIFICATION OF PARENTS' RIGHTS" and the CAREGIVER BACKGROUND CHECK PROCESS form from the licensee.

Name of Child Care Center

Signature (Parent/Authorized Representative)

Date

NOTE: This Acknowledgement must be kept in child's file and a copy of the Notification given to parent/authorized representative.

For the Department of Justice "Registered Sex Offender" database go to www.meganslaw.ca.gov

IDENTIFICATION AND EMERGENCY INFORMATION CHILD CARE CENTERS/FAMILY CHILD CARE HOMES

To Be Completed by Parent or Authorized Representative

CHILD'S NAME	LAST	MIDDLE	FIRST	SEX	TELEPHONE ()
ADDRESS	NUMBER	STREET	CITY	STATE	ZIP
PARENT / AUTHORIZED REPRESENTATIVE NAME	LAST	MIDDLE	FIRST	BUSINESS TELEPHONE ()	
	HOME ADDRESS	NUMBER	STREET	CITY	STATE ZIP
PARENT / AUTHORIZED REPRESENTATIVE NAME	LAST	MIDDLE	FIRST	BUSINESS TELEPHONE ()	
	HOME ADDRESS	NUMBER	STREET	CITY	STATE ZIP
PERSON RESPONSIBLE FOR CHILD	LAST	MIDDLE	FIRST	HOME TELEPHONE ()	BUSINESS TELEPHONE ()

ADDITIONAL PERSONS WHO MAY BE CALLED IN AN EMERGENCY

NAME	ADDRESS	TELEPHONE	RELATIONSHIP

PHYSICIAN OR DENTIST TO BE CALLED IN AN EMERGENCY

PHYSICIAN	ADDRESS	MEDICAL PLAN AND NUMBER	TELEPHONE ()
DENTIST	ADDRESS	MEDICAL PLAN AND NUMBER	TELEPHONE ()

IF PHYSICIAN CANNOT BE REACHED, WHAT ACTION SHOULD BE TAKEN?

CALL EMERGENCY HOSPITAL OTHER EXPLAIN: _____

NAMES OF PERSONS AUTHORIZED TO TAKE CHILD FROM THE FACILITY
 (CHILD WILL NOT BE ALLOWED TO LEAVE WITH ANY OTHER PERSON WITHOUT WRITTEN
 AUTHORIZATION FROM PARENT OR AUTHORIZED REPRESENTATIVE)

NAME	RELATIONSHIP

TIME CHILD WILL BE PICKED UP

SIGNATURE OF PARENT/GUARDIAN OR AUTHORIZED REPRESENTATIVE	DATE

**TO BE COMPLETED BY FACILITY DIRECTOR/ADMINISTRATOR/FAMILY
 CHILD CARE HOMES LICENSEE**

DATE OF ADMISSION	LAST DATE OF ENROLLMENT

CHILD’S PREADMISSION HEALTH HISTORY - PARENT/AUTHORIZED REPRESENTATIVE REPORT

CHILD’S NAME	SEX	BIRTHDATE
PARENT / AUTHORIZED REPRESENTATIVE NAME		DOES PARENT / AUTHORIZED REPRESENTATIVE LIVE IN HOME WITH CHILD?
PARENT / AUTHORIZED REPRESENTATIVE NAME		DOES PARENT / AUTHORIZED REPRESENTATIVE LIVE IN HOME WITH CHILD?
IS / HAS CHILD BEEN UNDER REGULAR SUPERVISION OF PHYSICIAN?		DATE OF LAST PHYSICAL/ MEDICAL EXAMINATION

DEVELOPMENTAL HISTORY (*For infants and preschool-age children only)

WALKED AT* _____ MONTHS	BEGAN TALKING AT* _____ MONTHS	TOILET TRAINING STARTED AT* _____ MONTHS
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PAST ILLNESSES — Check illnesses that child has had and specify approximate dates of illnesses:

	DATES		DATES		DATES
<input type="checkbox"/> Chicken Pox		<input type="checkbox"/> Diabetes		<input type="checkbox"/> Poliomyelitis	
<input type="checkbox"/> Asthma		<input type="checkbox"/> Epilepsy		<input type="checkbox"/> Ten-Day Measles (Rubeola)	
<input type="checkbox"/> Rheumatic Fever		<input type="checkbox"/> Whooping Cough		<input type="checkbox"/> Three-Day Measles (Rubella)	
<input type="checkbox"/> Hay Fever		<input type="checkbox"/> Mumps			

SPECIFY ANY OTHER SERIOUS OR SEVERE ILLNESSES OR ACCIDENTS

DOES CHILD HAVE FREQUENT COLDS? <input type="checkbox"/> YES <input type="checkbox"/> NO	HOW MANY IN LAST YEAR?	LIST ANY ALLERGIES STAFF SHOULD BE AWARE OF
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DAILY ROUTINES (*For infants and preschool-age children only)

WHAT TIME DOES CHILD GET UP?*	WHAT TIME DOES CHILD GO TO BED?*	DOES CHILD SLEEP WELL?*	
DOES CHILD SLEEP DURING THE DAY?*	WHEN?*	HOW LONG?*	
DIET PATTERN: (What does child usually eat for these meals?)	BREAKFAST		
	LUNCH		
	DINNER		
WHAT ARE USUAL EATING HOURS?	BREAKFAST		
	LUNCH		
	DINNER		
ANY FOOD DISLIKES?		ANY EATING PROBLEMS?	
IS CHILD TOILET TRAINED?*	IF YES, AT WHAT STAGE:*	ARE BOWEL MOVEMENTS REGULAR?*	WHAT IS USUAL TIME?*
<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	
WORD USED FOR "BOWEL MOVEMENT"*		WORD USED FOR URINATION*	

PARENT / AUTHORIZED REPRESENTATIVE EVALUATION OF CHILD'S HEALTH

IS CHILD PRESENTLY UNDER A DOCTOR'S CARE? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, NAME OF DOCTOR:	DOES CHILD TAKE PRESCRIBED MEDICATION(S)? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHAT KIND AND ANY SIDE EFFECTS:
DOES CHILD USE ANY SPECIAL DEVICE(S): <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHAT KIND:	DOES CHILD USE ANY SPECIAL DEVICE(S) AT HOME? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHAT KIND:

PARENT/ AUTHORIZED REPRESENTATIVE EVALUATION OF CHILD'S PERSONALITY

HOW DOES CHILD GET ALONG WITH PARENT / AUTHORIZED REPRESENTATIVE, BROTHERS, SISTERS AND OTHER CHILDREN?

HAS THE CHILD HAD GROUP PLAY EXPERIENCES?

DOES THE CHILD HAVE ANY SPECIAL PROBLEMS/FEARS/NEEDS? (EXPLAIN.)

WHAT IS THE PLAN FOR CARE WHEN THE CHILD IS ILL?

REASON FOR REQUESTING DAY CARE PLACEMENT

PARENT/AUTHORIZED REPRESENTATIVE SIGNATURE

DATE

PARENT NOTIFICATION ADDITIONAL CHILDREN IN CARE

As required by Health and Safety Code Sections 1597.44(c) and 1597.465(c), you are hereby notified that: *(Check one)*

I am licensed as a Small Family Child Care Home and may provide care for more than six and up to eight children when one child is enrolled in and attending kindergarten (including transitional kindergarten) or elementary school, and another child is at least six years old, and no more than two infants are in care.

I am licensed as a Large Family Child Care Home, and with an assistant provider, may provide care for more than 12 and up to 14 children when one child is enrolled in and attending kindergarten (including transitional kindergarten) or elementary school, and another child is at least six years old, and no more than three infants are in care.

(PRINT FACILITY ADDRESS)

(CUT ALONG DOTTED LINE)

RECEIPT OF PARENT NOTIFICATION (Facility Copy) Additional Children in Care

I, _____, acknowledge receipt of the notification that this Small Family Child Care Home may be providing care for more than six and up to eight children, or that this Large Family Child Care Home may be providing care for more than 12 and up to 14 children in accordance with Health and Safety Code Sections 1597.44 and 1597.465.

(PARENT/AUTHORIZED REPRESENTATIVE SIGNATURE)

(DATE)

(CHILD'S NAME)

**Maintain the completed and signed bottom half of this form in the child's record
and provide the completed top half of this form to the child's parent or authorized representative.**



MEDICATION RELEASE FORM

Please carefully read, sign and return the following form to the director.

I, _____, give permission for A Mothers Love Family Child Care or her assistants at the daycare facility to use any of the following medications, ointments or behavioral items:

(please initial next to items you permit)

____ Sunscreen lotion

____ Diaper rash ointment (eg. Buttpaste, Desitin, Aquaphor, etc.)

____ Pacifier

____ Medications prescribed from Doctor (must be with written instructions and in original box)

____ Tylenol or teething medicine

____ Any ointment or lotion provided by you, the parent

____ Any other items not listed as per requested by you the parent or a doctor (with note)

I will not hold A Mothers Love Family Child Care liable or responsible for any allergies or reactions caused by administering above permitted agents to ensure child's safety and well-being.

Parent/Guardian Signature

Date



A MOTHERS LOVE FAMILY CHILD CARE

4558 WEST 62ND STREET LOS ANGELES, CA 90043

OFFICE: (310) 213-2808

AMOTHERSLOVEFCC.COM

