



Enrollment Checklist Please complete one form for each child.

Child's Full Name _____

- ☐ Immunization Record
- ☐ Health Physical
- ☐ Family Handbook Acknowledgement Form
- ☐ Enrollment Form
- ☐ Emergency Contact Form
- ☐ Photo Release Form
- ☐ Influenza Brochure Acknowledgement
- ☐ Food Program Form
- ☐ Blanket
- ☐ Crib Sheet
- ☐ Extra Clothing
- ☐ Diapers

Checks List for Preschool Use only

____ Cubby ____ Brightwheel Registration ____ Teacher introduction ____ Uniform T Shirt ____ Happy Friday Shirt
____ Water Bottle ____ Nanny Cam Password Set up ____ Milk Sippy Cup ____ Student Assessment

Child's Enrollment/Information Form

CHILD'S NAME: _____

NICK NAME: _____ Dad Email: _____

DOB: _____ DATE ENROLLED: _____ Mom Email: _____

ADDRESS: _____ ZIP CODE: _____

MOTHER'S NAME: _____ FATHER'S NAME: _____

CUSTODIAL PARENT (CIRCLE ONE): MOTHER FATHER JOINT

HOME/CELL PHONE: _____ HOME/CELLPHONE: _____

EMPLOYER: _____ EMPLOYER: _____

WORK PHONE: _____ WORK PHONE: _____

LEGAL GUARDIAN NAME (if different than above):

PERSONS AUTHORIZED TO REMOVE CHILD (LEGAL IDENTIFICATION REQUIRED)

- | 1. | NAME | RELATIONSHIP | PHONE |
|----|------|--------------|-------|
| 2. | NAME | RELATIONSHIP | PHONE |
-

ALTERNATE NUTRITION PLAN AGREEMENT I understand and approve the use of the Alternate Nutrition Plan. I agree to provide the following meals and/or snacks to meet my child's nutritional and dietary needs. Indicate any Special Dietary Requirements: _____

(Mark "P" for Parent Provides, or "C" for Center Provides) Outside meal only with Doctor Note.

_____ Breakfast A.M. _____ Snack A.M. _____ Lunch _____ Snack P.M. _____ Formula, Milk

HILLSBOROUGH COUNTY ORDINANCE requires that parents must receive a copy of the "KNOW YOUR CHILD CARE FACILITY/FCCH BROCHURE", information on the INFLUENZA (FLU) VIRUS, and the parents are notified in writing of the "DISCIPLINARY PRACTICES" used by the Child Care Facility/FCCH. The parent's/ legal guardian's signature certifies receipt of the Child Care Facility/FCCH brochure, influenza information, discipline policies, alternate nutrition plan agreement and that all the information on this form is complete and accurate.

Signature of Parent or Legal Guardian

Date

Top Kids Bilingual Preschool Medical Alert Information

(i.e., allergies, medical and/or special needs/conditions)

List any additional information which would be beneficial for the child care provider to know about your child:

Preferred Physician:

Address: _____ Phone: _____

Preferred Hospital:

NOTE: Physical & Immunization Record should accompany child.

EMERGENCY CONTACT (OTHER THAN PARENTS):

1.	NAME	RELATIONSHIP	PHONE
2.	NAME	RELATIONSHIP	PHONE

AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT

If my child, _____, Child's Full Name

should become ill or Injured at, Top Kids Bilingual Preschool, I understand that TOP KIDS BILINGUAL PRESCHOOL will:

(1) Contact me immediately and (2) Contact the person (s) I have designated if I cannot be reached.

Should the provider be unable to reach me and/or the person(s) designated, they are authorized to contact my child's physician and/or arrange for immediate medical treatment.

The physician and/or medical facility are authorized to administer emergency medical treatment necessary to ensure the health and safety of my child. In case no one answer, Parent or person in Emergency or been contacted and no one pick up child within 30 minutes after been call Top Kids Bilingual Preschool will call 911 to treat your child.

I will accept responsibility for payment of medical services rendered.

SIGNATURE

RELATIONSHIP

DATE

(OPTIONAL) Sworn to and subscribed before me this _____, day of _____, 20____.

Notary Public, State of Florida – At Large.

My Commission Expires: _____ who is/are personally known to me

who has/have produced identification: _____



KNOW YOUR CHILD CARE FACILITY

Hillsborough County

Choosing an appropriate child care program is an important decision for both the parent and the child. Family needs as well as the child's individual needs should be considered in this process, including the child's age and developmental level.

This brochure is intended to provide helpful information regarding child care facilities. It summarizes the quality indicators of a child care facility, the parent's role in quality care, and some of the minimum standards used to license child care facilities.

This child care facility has met the state minimum child care licensure standards as outlined in section 402.305, Florida Statutes and Hillsborough County Child Care Licensing Ordinance 13-5.

License Issued on _____

License Expires on _____

CHILD CARE BROCHURE STATEMENT

(Chapter 402.3125, F.S.)

On, __/__/__,

(Name of Parent or Legal Guardian) received a copy of the Child Care Brochure.

(Signature of Parent or Legal Guardian)

(Name of Child)

This information is for the facility's children's file unless statement is included on enrollment form.

Quality Child Care

Quality child care offers the child healthy, social and educational experiences under qualified supervision in a safe, nurturing, and stimulating environment.

Children in quality child care settings also participate in daily age appropriate activities that help develop essential skills, build independence and instill self respect.

When evaluating child care settings for quality, the following quality indicators should be considered:

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 the social and emotional needs and developmental tasks for all children.

Quality Environments

- ✓ Are clean, safe, inviting, comfortable, and 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.

Quality Activities

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

Parent's Role

The parent's role in quality child care is vital to its success. In partnering with the caregiver to achieve this goal, parents should:

- ✓ Familiarize themselves with the child care standards used to license the child care facility.
- ✓ Inquire about the qualification and experience of child care staff as well as staff longevity.
- ✓ Know the facility's policies and procedures.
- ✓ Communicate with the caregiver.
- ✓ Visit and observe the facility and participate in special activities as well as scheduled meetings and conferences.
- ✓ Talk to their child about their daily experiences in child care. ✓ Arrange alternate care for their child if they are sick.

Licensing Standards

Hillsborough County Child Care Licensing Ordinance

Every licensed child care facility should maintain licensing standards that include but are not limited to, the following:

General Information

- ✓ Have a valid license posted for parents to see.
- ✓ Have all staff appropriately screened.
- ✓ Maintain minimum staff-to-child ratios:

Under 1 year old	1:4	1 year old	1:6	2 year old	1:11
3 year old	1:15	4 year old	1:20		
5 years and older	1:25				

- ✓ Maintain appropriate transportation vehicles and procedures.
- ✓ Provide parents with written age appropriate disciplinary practices used by the facility.
- ✓ Provide access to the facility during normal hours of operation.
- ✓ Maintain usable indoor floor space for playing, working and napping.

Physical Environment

- ✓ Provide space that is clean and free of litter and other hazards.
- ✓ Equipped with age and developmentally appropriate toys, bathroom facilities and other sufficient age appropriate furnishings.
- ✓ Provide isolation area for children who become ill.
- ✓ Instill proper handwashing, toileting and diapering activities. ✓ Be accessible and appropriate for all children.

Training Requirements

- ✓ 45 hour Introductory Child Care Training.
- ✓ 10 hours annual In service training.
- ✓ Facility Directors must have a valid Florida Director Credential.

Health Related Requirements

- ✓ Have established emergency procedures that include:
 - 1-800-962-2873 Florida Abuse Hotline number posted along with other emergency numbers.
 - Staff trained in First Aid and CPR on the premises at all times.
 - Fully stocked first aid kit.
 - A working fire extinguisher and monthly fire drills and emergency drills posted.
 - Have a locked storage place for storing medication and hazardous materials.

Food and Nutrition

- ✓ Posted menus for snacks and meals that provide daily nutritional needs of the children.

Record Keeping

- ✓ Maintain accurate records that include:
 - Children's health exams and immunization records
 - Medication records
 - Enrollment information
 - Personnel records
 - Accurate daily attendance records
 - Accident and Incident reports
 - Parental permission for field trips

Additional Information

For further information about child care or specific child care facilities, please contact the Hillsborough County Child Care Licensing Program Website:

www.hillsboroughcounty.org/childcarelicensing

Phone number: (813) 264-3925

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/>

CHILD INTRODUCTION FORM

Top Kids Bilingual Preschool

Please help me get to know your child. What are his/her routines, likes, dislikes etc.

Eating _____

Sleeping _____

Toileting _____

Daily Activities _____

Fears _____

Likes _____

Dislikes _____

Habits _____

Favorites _____

Tell me a little about where your child is developmentally

What other information should I know/be aware of to care for your child as an individual? Events at home often influence your child's behavior. I am better able to help your child when you inform me of situations and/or events that might influence his/her overall behavior such as:

__ Divorce.

__ Separation from a relative or friend.

__ Death of a relative or friend.

Knowing about these transitional times allows me to give special attention, understanding, and care. The information you give me will remain confidential. Has anything happened recently in your child's life that might have an effect on her/him?

E M E R G E N C Y
C O N T A C T I N F O R M A T I O N F O R M

Child's Name: _____

Parents Name(s): _____

Home Phone: _____ Cell Phone: _____ Other Phone: _____

PRINCIPAL PURPOSE(S) for which **emergency contact information** is intended to be used:

(1) Person(s) to be notified in case of emergency

(2) Provides several means of contacting parents for emergency or pick up from Preschool/ Daycare.

Person(s) to be notified in case of an emergency or pickup:

Name(s): _____ Relationship: Relative ☐ Friend ☐ Other _____

Home Phone: _____ Cell Phone: _____ Other Phone: _____

Secondary person to be notified in case of emergency:

Name(s): _____ Relationship: Relative ☐ Friend ☐ Other _____

Home Phone: _____ Cell Phone: _____ Other Phone: _____

Additional friends/family who have permission to pick up my child from camp. Please include babysitters or other child care providers that may pick up/drop off your child(ren).

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Parent's Signature _____ Date: _____

6701 S. Manhattan Ave. Tampa, FL 33616

10530 Lake St Charles Blvd, Riverview, FL 33578



Photo Release Authorization & Nanny Video Recording Cameras Acknowledgement

*Please fill out this document and return it to the front office as soon as possible.

All rights reserved

In connection with any photos, video, social media and/or other images taken at Top Kids Bilingual Preschool or at Top Kids Bilingual Preschool events, I hereby give Top Kids Bilingual Preschool the absolute and irrevocable right and permission, with respect to the photographs, video, social media and/ or other images containing myself, my child/children, or in which we/they may be included with others:

- I hereby give permission to use, reuse, publish and re-publish the same in whole or in part, individually or in conjunction with other photographs, in any medium and for any purposes whatsoever, including (but not by way of limitation) illustration, and educational purposes, and, To use their name in connection there with if it so required.
- I hereby release and discharge Top Kids Bilingual Preschool from any claims and demands arising out of or in connection with the use of the photos, videos, social media and/or other images, including any and all claims for libel. This authorization and release shall ensure to the benefit for the legal representatives, licensees and assigns of Top Kids Bilingual Preschool as well as, the person(s) company for whom we took the photographs.
- (c) I have fully read the foregoing and fully understand the contents thereof

Child's Full Name _____ Date of Birth _____

Parents Name _____ Date _____

Parents Signature _____ Date _____



Nanny Cam Acknowledgment

Although we've implemented maximum level security measures to protect against unauthorized access to the Swann view Plus system, you as parents and guardians have the responsibility of protecting your Usernames and Password.

Remember, your Swann View Plus Usernames and Passwords provide unique identifiers that enable our system to identify authorized users.

Therefore, your login information is the first line of defense against unauthorized access. As concerned parents and users of the Swann View Plus system, it is your responsible to maintain exclusive control and use of your Username and Password and protect it from inadvertent disclosure to others.

YOU SHOULD NEVER GIVE YOUR PASSWORD TO ANYONE.

Once you have read and understand the guidelines/responsibilities, please sign and return the completed form to Top Kids Bilingual Preschool.

I am a legal guardian of a child enrolled at Top Kids Bilingual Preschool. I have read the above information, and understand that cameras have been installed at Top Kids Bilingual Preschool for the purpose of streaming enrolled children over the Internet for parents and other authorized users to access.

I Understand that Top Kids Bilingual Preschool provide live streaming video recording from 6:30 AM to 6:00 PM Monday to Friday for my benefit. Parent can watch their kids on any device connected to the internet and that the app permits parents to snap a picture. Top Kids Bilingual Preschool is not responsible of any publication others may publish on social media etc.

I will not share or disclose my password with anyone. I understand that I can share this information with spouse and Grandparents in order to allow spouses and grandparents an opportunity to view the system.

Enrolled Child(ren) Printed Name(s)

Your Printed Name

Your Signature

Date _____



Handbook Signature Page

I/We, _____ the parents of _____, have received, read, had the opportunity to ask questions about, understand and agree to abide by the policies set forth in the Top Kids Bilingual Preschool parent handbook.

Furthermore, I/We agree to abide by the policies set forth in the manual. I/We understand that the policies described in the Parent Handbook are not conditions of enrollment, and the language does not create a contract between Top Kids Bilingual Preschool and the parents. Top Kids Bilingual Preschools reserves the right to alter, amend, or otherwise modify these guidelines, in its sole discretion, without prior notice.

I/We also understand that future questions regarding policies in the parent handbook may be directed to the center Director or corporate office.

_____ Signature Date: _____

Parent/Guardian

_____ Signature Date: _____

Parent/Guardian

Top Kids Bilingual Preschool

Uniform Policy

Top Kids Bilingual Preschool require your child to wear a uniform except for Infants.

We do find that children love to wear a uniform as it helps make them feel part of the group and makes them feel 'grown up'. It is also worth considering that the children will often be taking part in 'mucky' activities like gardening and painting and, although they usually have painting smocks e.t.c., you might want to protect their 'good' clothes as accidents and stains still happen.

**I LOOK SO CUTE
ON MY SCHOOL UNIFORM**



VPK

School Polo (White, Gray or Light Gray with school logo)
any Khaqui pants or skirt with closed shoes

Preschool

1 Year old's to 3 Year old's

School Polo (Gray or Light Gray with school logo)
any Khaqui pants or skirt with closed shoes

Need more shirts? We have more at the Office

Our uniform consists of a Polo or t-shirt with the Top Kids logo. We also give your first polo or T Shirt for free.

Cost We have tried to keep the cost of our uniform low. Top Kids Bilingual don't get profit for uniforms.

Item:	Size:	Cost:
T-Shirt	2T, 3T,	\$10.00
Polo Shirt	4T, 6T	\$12.00