



**Caterpillar Lane Preschool Handbook**

749 Connolly Drive  
Red Lion, PA 17356

Child's Name: \_\_\_\_\_

Enrollment Date: \_\_\_\_\_

DOB: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

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Parent/Guardian Name: \_\_\_\_\_

Cell: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address (If different from child): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent/Guardian

Name: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

\_\_\_\_\_

Cell: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address (If different from child): \_\_\_\_\_

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Parent Initials \_\_\_\_\_ Date \_\_\_\_\_

Persons to whom the child may be released:

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Persons authorized/requesting to have an account with brightwheel to receive school updates and messages to their phone (Name, phone number, email):

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Contracted Days/Hours of Care:

Monday: \_\_\_\_\_

Tuesday: \_\_\_\_\_

Wednesday: \_\_\_\_\_

Thursday: \_\_\_\_\_

Friday: \_\_\_\_\_

**Policies and Procedures:**

If illness or other emergencies should arise during child care hours every attempt will be made to have a substitute provider care for your child so that I can remain open for child care. If substitute care is not available, you will receive a phone call to pick up your child. Whenever possible medical and personal appointments will be made after child care hours, however, if I must use child care hours to secure appointments every attempt will be made to have a substitute provider present. If a substitute is not available, I will have to close my child care home. For your convenience, I distribute my scheduled closings for vacations and holidays within the first quarter of each year. Every attempt will be made to minimize any changes in this schedule. Whenever possible, I will give at least one months' notice before making any changes to this schedule to allow parents time to find alternative care.

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Paid holiday closings: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving and the day after, Christmas Eve, Christmas Day. When the holiday falls on a Saturday or Sunday, the acknowledged Federal/State holiday prevails; i.e. Christmas is on Sunday and the acknowledged Federal holiday is Monday December 26<sup>th</sup>. The daycare will be closed for winter break every year between Christmas and New Year's Day. Specific Dates will be provided with the schedule at the beginning of the year.

Vacation closing: 10 paid vacation days per year; all other vacation days are not paid, if any occur.

Please respect that when my child care home is closed for vacation, I am taking this time to rest and to be with my family or just to catch up on home duties. I take my job very seriously, and consider this to be a legitimate long-term career. To accomplish this, I need this time out to maintain the energy level it takes to give your child the quality care he/she deserves. *I do reserve the right to close for any reason in which I cannot operate in a safe manner. i.e. loss of electricity, water, heat or in extreme circumstances loss of air conditioning, and medical epidemics. Child care fees are paid for any of these occurrences.*

**Gross Misconduct:**

I will communicate to you immediately if your child is frequently causing harm to others and/or is frequently and deliberately destructive. This behavior is unsafe and will not be allowed – immediate termination will ensue if the behavior persists.

*Biting:* Although biting can be a normal part of development for many children, this behavior is particularly harmful and difficult to mitigate. In the best interest of all the children in my care, I may choose to terminate care immediately due to biting, and will review each scenario on a case-by-case basis.

**Child's Health:**

Health assessments shall be certified by your child's physician or nurse practitioner and shall be updated yearly up to the age of 5 in accordance with the recommended schedule for routine health supervision of the American Academy of Pediatrics. For children below school age, the health appraisal shall include documentation of the recommendations of the division of public health, as described below:

- Age: 2 months – DTP, TOPV, HbCV(1)
- 4 months - DTP, TOPV, HbCV(1)
- 6 months - DTP, TOPV, HbCV(1)
- 12 months – MMR
- 15 months – DTP, HbCV(1)
- 4 to 6 years - DTP, TOPV, MMR

To ensure the spread of illness in the daycare, a child cannot be admitted with symptoms of illness as specified below; unless written documentation from a licensed physician, or verbal (with written follow up) states the child has been diagnosed and poses no serious health risk to the child or to other children. Should your child have signs or symptoms requiring exclusion from the family child care home he/she will be isolated and the parent/guardian or other authorized person by the parent will be notified immediately to pick up your child. There can be no exceptions since illness spreads quickly among children. Please make other arrangements if your child is sick and respect my decision if I feel your child is too sick to be in child care. I am sympathetic to the difficulties of taking time off, so discretion will be used.

Parent Initials \_\_\_\_\_ Date \_\_\_\_\_

The symptoms of illness for possible exclusion shall include, but are not limited to any of the following...

- A. The illness prevents your child from participating comfortably in the day care environment,  
B. The illness results in a greater care need than I can provide without compromising the health and safety of the other children in my care, Or C. The child has any of the following conditions:

- Temperature: **Oral temperature 100 degrees or greater; axillary (armpit) temperature 101 degrees or greater;** accompanied by behavior changes or other signs or symptoms of illness- until medical evaluation indicates inclusion in the facility. Oral temperature shall not be taken on children younger than 4 years (or younger than 3 years if a digital thermometer is used).
- Symptoms and signs of possible severe illness (such as unusual lethargy, uncontrolled coughing, irritability, persistent crying, difficult breathing, wheezing, or other unusual signs)- until medical evaluation allows inclusion;
- Uncontrolled diarrhea, that is, increased number of stools, increased stool water, and/or decreased form that is not contained by the diaper- until diarrhea stops;
- Vomiting illness (two or more episodes of vomiting in the previous 24 hours) until vomiting resolves or until a health care provider determines the illness to be non-communicable, and the child is not in danger of dehydration;
- Mouth sores with drooling, unless a health care provider or health official determines the condition is noninfectious;
- Rash with fever or behavior change, until a health care provider determines that these symptoms do not indicate a communicable disease;
- Purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow eye discharge), until 24 hours after treatment has been initiated;
- viii. Scabies, head lice, or other infestation, until 24 hours after treatment has been initiated;
- Tuberculosis, until a health care provider or health official states that the child can attend child care;
- Impetigo, until 24 hours after treatment has been initiated;
- Strep throat or other streptococcal infection, until 24 hours after initial antibiotic treatment and cessation of fever;
- Chicken pox, until at least 6 days after onset of rash or until all sores have dried and crusted;
- Pertussis, until 5 days of appropriate antibiotic treatment (currently; erythromycin) to prevent an infection have been completed and a licensed physician states in writing the child may return;
- Mumps, until 9 days after onset of parotid gland swelling and a licensed physician states in writing the child may return;
- Hepatitis A virus, until 1 week after onset of illness or as directed by the health department when passive immunoprophylaxis (currently, immune serum globulin) has been administered to appropriate children and staff and a licensed physician states in writing the child may return;
- Measles, until 6 days after onset of rash and a licensed physician states in writing the child may return;
- Rubella, until 6 days after onset of rash and a licensed physician states in writing the child may return;

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- Unspecified respiratory illness if it limits the child's comfortable participation in activities or if it results in a need for greater care than can be provided without compromising the health and safety of other children.

Always inform your doctor at every sick visit that your child is in daycare so that he/she can approve in writing your child's return to daycare. If your child had an immunization update, please remember to provide me with a record of the immunization so that it can be attached to your child's health assessment.

**Injuries:** I will supervise your child closely to help prevent injuries, but accidents resulting in injury do occur. I have been trained in first aid and CPR and will follow my training. If the injury is minor (requiring only a band-aid or ice) I will tell you about it when you pick up your child. If it is serious, I will call you and may even suggest that you take your child to the doctor or emergency room. If an injury is very severe, I will call 911 for assistance before I call you. If I cannot reach you, I will call the emergency contacts listed on your "Emergency Contact" form.

**Child's Medication:**

Medication will only be administered when absolutely necessary for the health of the child such as an EpiPen for anaphylaxis. Most prescription medications and over-the-counter medicines will not be administered to a child while in my care.

1. Prescription medicine **must**:
  - a. be dated with in the past 30 days
  - b. have child's name printed clearly on the label
  - c. have dosage amount and times
2. Prescription medicine must also be accompanied by a "medication log" which **must include**:
  - a. date
  - b. Child's name
  - c. Doctor's name and phone number
  - d. Pharmacist name and phone number
  - e. Name of medication
  - f. Dosage amounts and times to be administered
  - g. Route of medication, i.e. oral, eye, etc.
  - h. Why medication is needed
  - i. Date medication is to end
  - j. Special directions, i.e. take before eating, etc.
  - k. Parent's signature

**Days/Hours of Operation:**

Child care is available Monday through Friday except for closings as referred to in this handbook. Actual days and hours are determined by the parent/guardian's individual needs. Please understand that the contracted drop-off time is important because I plan our day around the collective time frame of each child as well as each other phase of our morning routine – **please** call me or text me if you know that you will be more than 15 minutes late. Our contracted pick-up time is equally important; there are several things to do before the children leave – snack time, calm down time, clean up (personal as well as day care room), shoes on etc. It is equally important that I can complete other personal evening commitments.

**Late Drop-Off and Pick-Up:**

Parent Initials \_\_\_\_\_ Date \_\_\_\_\_

Please call me if you will be late dropping your child off late. It is very important to me and the other children to know our schedule (breakfast, etc.) and when we can move along from one activity to another. I'm sure you agree, personal time is precious; accordingly, it becomes extremely difficult to schedule personal evening appointments and family commitments if I cannot depend on the mutually agreed pick up time. Understand that there may be an occasion of major traffic congestion or bad weather conditions causing a delay in your travel – if you have a cellular phone, please call me and perhaps we can work out a contingency plan. Consistent tardiness could be cause for termination. A \$5.00 late fee for the first 15 minutes past our agreed pick up time and then \$10 for each additional 15 minutes, payable upon arrival but no later than that Friday's payment.

**Release of Children:**

It is important that I protect your child by ensuring that your child does not leave my home with a person you have not authorized on your emergency contact form to pick up your child. Please tell me when someone else that you have authorized will be picking up your child. Even if it is an emergency, I must have your permission to release your child to someone other than you. I will need the person's name and a description of what he or she looks like. The person picking up your child will have to show me a picture ID before I will release your child from my care.

I must assume that both parents have the right to pick up your child, unless you give me a copy of a court order stating otherwise. We will need to discuss how I should handle the non-custodial parent who arrives to pick up your child. Without a copy of the court order, I cannot refuse a parent. If I have a court order and a non-custodial parent tries to pick up the child, I will immediately call the custodial parent. If the non-custodial parent leaves with the child, I will immediately call the police and report the situation. I will not place the other children at risk in a confrontation with the non-custodial parent. It is very important to me that your child arrives home safely. Therefore, If the person who arrives to pick up your child appears intoxicated or otherwise incapable of bringing your child home safely, I will call the parent or emergency contact person listed on the emergency contact form to request their assistance. If the situation occurs a second time, it will be grounds for terminating my care of your child.

**Tuition Payment Guidelines:**

Child care tuition is paid in advance on a weekly, bi-weekly, or monthly basis – the Friday **before** the week begins or the last scheduled day of attendance for the week. Payment obligation is based on the hours agreed to use child care, not on actual attendance. There is no change in fee due to your child's absences. If your child is absent or I am closed on the Friday **before** the week begins or the last scheduled day of attendance for the week, you are responsible to make payment as agreed. Daycare fees may be increased at the discretion of the provider. A two-week notice of any increase will be posted. When a "sale-rate" is offered at the time of enrollment the provider may choose to increase the weekly rate after 1 year of enrollment if a time-frame is not otherwise specified in the agreement.

*Late payments* – A \$5 late payment fee will be charged for each day payment is not received. If lateness becomes a consistent issue, your child may not be permitted to return to child care until both the payment and the late fee are paid in full.

**Early Drop-off:**

Any care needed prior to my normal opening time will need to be scheduled at least by the Friday prior to the week care is needed. As a result, there will be a charge of \$5.00 per 15 minutes (or part of) for care prior to normal opening time. Payment for this additional time is due by the

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Friday prior to the week care is scheduled. This fee is non-refundable. This includes if you decide not to bring the child early.

**Late Starts, Early Dismissal, Snow Days:**

**INCLEMENT WEATHER CLOSINGS will be determined at the discretion of the provider. I understand that it is difficult to find alternative childcare in any situation and will try to remain open whenever possible. Notifications regarding closings will be provided.**

**Termination:**

Parent/Guardian will give two weeks written notice, and two weeks' full payment to terminate your child's enrollment in child care **regardless as to whether your child is present.** If two weeks' notice is not given, you are still financially obligated for the two weeks of child care fees and late payments; two weeks' full payment still applies when notice is given in conjunction with the provider's vacation.

**Deposit/Registration Fee:**

At the time of enrollment, a signed contract and deposit will be required to hold a spot. Two weeks' tuition will be due at signing. One week of tuition will cover a registration fee used to hold your child's spot until child care has commenced and complete necessary work for enrollment. The remaining payment will cover your child's first week of tuition. After our start date, the first of our regular payments will be due the first upcoming Friday for the following week of care. **Please understand that during periods in which I am accepting interviews I may be communicating with any number of families. Spots are limited and may be filled quickly.**

**Transportation:**

Please understand that we are guests in this neighborhood and must do our utmost to set a high standard for child transport and parking. When transporting your child to and from preschool please:

- **Do not exceed 20 mph** when driving in the neighborhood.
- **Only park in the driveway or on the street directly outside my home.**
- Use the driveway to turn around when exiting. **Please do not use the culdesac to turn around.**

Repeated violations of the above transportation guidelines **may result in termination of care.**

**Covid-19:**

The following policies have been adopted to help mitigate the spread of covid-19:

- **By sending your child to preschool you CERTIFY THAT THEY HAVE NOT DISPLAYED THE FOLLOWING SYMPTOMS WITHIN 24 HOURS OF ATTENDING SCHOOL:**
  - **Fever**
  - **Persistent cough accompanied with other signs of illness**
- **AND ALSO THAT YOUR CHILD HAS NOT HAD:**
  - **Recent exposure to anyone diagnosed with covid-19**
  - **Recent exposure to anyone suspected of having covid-19**

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- When possible, parents are asked to stay at the door for pick up and not come inside the facility.
- When possible, backpacks and stuffies should be left at school unless they are sent home for cleaning.
- Please send a mask to school for your child to have. They will be encouraged to wear masks but never forced.
- You are required to report your child's suspected exposure to covid-19 **IMMEDIATELY** so that appropriate action can be taken.
- Increased cleaning and sanitation procedures have been put in place to mitigate the spread of illness in care. This includes increased handwashing, surface cleaning and disinfecting, limiting the sharing of toys, the use of soft materials that may be hard to clean, and reducing the number of items coming to and from school.

**Meals and Snacks:**

An AM and PM snack will be provided during the day for your child, depending on their hours of attendance. When your child is present for full day child care please send them with a packed lunch.

**Materials for School:**

The following materials should be sent to school with your child. All children in care will need:

- A change of clothes in a **gallon ziplock bag, labeled with your child's name.**

Children staying for full day child care:

- A backpack with a warm blanket and small pillow. *Please make sure your little one is able to easily manage putting these items into the bag independently.*
- A packed lunch.

**Daily Schedule:**

The following schedule is used to guide daily activities at Caterpillar Lane. Please note that the schedule is subject to change based on the individual needs of the class on any given day.

7:00-8:15 AM - Arrival, greeting, individual or small group exercises

8:15-8:30 AM - Circle time

8:30-9:00 AM - Small group activities

9:00-9:30 AM - Free play

9:30-9:45 AM - Snack/Story time

9:45-9:55 AM - Toileting

9:55-10:25 AM - Outdoor Play

10:30-10:45 AM - AM preschool departure/Indoor quiet play

10:45- 11:30 AM - Lunch

11:30 - 12:00 PM - Toileting/Prepare for naptime

12:10 - 3:00 PM - **NAP TIME- IF AT ALL POSSIBLE DO NOT PLAN TO PICKUP YOUR CHILD DURING THIS TIME- MESSAGE ME IF NECESSARY.**

3:00 - 4:00 PM - Small group activities and learning extensions

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4:00 - 5:00 PM- Free play/Outdoor play/Child departure

**Photography and Videography Release:**

When consent is provided, Caterpillar Lane may use child images and video footage to enhance parent-provider communications and share special moments at school as well as for marketing purposes. By initialing below:

\_\_\_\_\_ **I CONSENT** to grant Caterpillar Lane Family Child Care and it's entities the right to record, edit, use, reproduce, publish and distribute by way of photograph, video and all other media (electronic or otherwise) the video and/or likeness of my

student \_\_\_\_\_. This consent applies to images taken while my student is enrolled at Caterpillar Lane.

**OR**

\_\_\_\_\_ **I DECLINE TO CONSENT** to grant Caterpillar Lane Family Child Care and it's entities the right to record, edit, use, reproduce, publish and distribute by way of photograph, video and all other media (electronic or otherwise) the video and/or likeness of my student.

**Please initial the following:**

\_\_\_\_\_ I have received a copy of this contract.

\_\_\_\_\_ I understand that my child's initial health service report/assessment must be returned to this facility no later than 7 calendar days after enrollment.

\_\_\_\_\_ I agree to provide additional health service reports/assessments for my child annually, as well as any other relevant immunization information as it becomes available.

\_\_\_\_\_ I agree to review and update my child's emergency contact information bi-annually and to provide any updates or changes to the information on this form immediately.

I have read and understand the information above and agree that it is an extension of the contractual agreement with Caterpillar Lane Family Child Care.

**APPROVED AS TO FORM AND CONTENT:**

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Daycare Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Initials \_\_\_\_\_ Date \_\_\_\_\_