

HELLO NEW PARENTS!

PLEASE REVIEW OUR CHILDREN'S MINISTRY POLICIES
BELOW TO FAMILIARIZE YOURSELF WITH OUR CHURCH
*PARTICULARLY THOSE IN **RED** OF MOST IMPORTANCE*

CHECK-IN + CHECK-OUT:

- Check-in for children Aged 4-Grade 6 opens at 10:15AM downstairs at the "Check-In Station". **Once your children are checked-in, they must remain in their classroom.**
- Nursery Ages 0-3 will be dismissed after the Worship Service is finished in the Sanctuary. Please use the stairwell at the front of the Sanctuary. At that time our volunteers will be ready to check-in your infant/toddler.
- **To assist our volunteers, please collect your child immediately after service.** We understand parents can get caught up talking, but please be aware of our volunteers' time. **Children will not be released to anyone other than parents/guardians.** Anytime a volunteer is unsure about a person's identity, photo ID will be required.
- **All parents are expected to remain on-site while their child is in Calvary Kid's Ministry**

BATHROOM USAGE:

- Please check your child's bathroom needs BEFORE he or she is checked into class. Our teachers work diligently to prepare lessons and activities that will minister to your children, and we don't want them to miss anything. This small detail will help us hold your child's attention and dramatically impact classroom dynamics.
- Our volunteers do not change diapers. If your child requires a diaper change, you will be texted to attend to this.

OUR VOLUNTEERS:

- We take time to ensure that all our volunteers are vetted, background-checked and signed off on Calvary Chapel's "*Policy for Protecting Vulnerable Persons*" (available upon request). We trust the volunteers that serve in our ministry as they care and minister to your children.
- Our policy is to have at least 2 adult volunteers in line of sight of each.
- All of our volunteers are paired in such a way to remain accountable to one another. Our classrooms have windows and glass doors for easy accountability.

***SICKNESS:**

- **We ask that you keep your child with you, if he or she has experienced any of the following symptoms within the last 24 hours:**
 - fever
 - vomiting

- **diarrhea**
 - **sore throat or cough**
 - **coloured discharge from eyes or nose**
 - **unexplained or contagious rash, lice**
 - **diagnosed illness (e.g. pink eye, measles, mumps, chicken pox)**
- Calvary Kids is a “well-child” ministry. Children may be declined from check-in or dismissed early from class if they show signs of illness or an inability to participate with the group due to illness symptoms.
 - Children may attend class with continually-clear runny noses or non-contagious rashes due to allergies.

PARENT TEXT SYSTEM:

- We will keep your cell phone number on file in order to communicate with you during service.
- In the best interest of the child, Calvary Kids will not host a child who is sick, injured, inconsolable, or misbehaving. If any of these situations arise, we will contact you via text.
- **If you see a text from one of our volunteers, please leave the service immediately and go to the child’s classroom. We ask that you do not return to service with an overly active/noisy child, unless you can calm them down.**

RUNNING:

- **We love that our children have such fun together, but please do not allow running upstairs. This will benefit the elderly in our church body, as well as tiny little ones.**

EVACUATIONS:

- **In the event that the facility must be evacuated, please follow this simple procedure: DO NOT go & try to fetch your child. Our volunteers will safely escort your child to a meeting area which is outside the Church Main Doors at the Stop Sign.**
- **If re-entry isn’t possible, DO re-connect with your child outside, proceeding with the normal check out process.**

CONTACT US:

- For more information email Madison Hickey at madisonhickey@calvarylondon.com

INTAKE FORM

PLEASE FILL OUT THE BELOW FORM SO THAT WE CAN CARE AND MINISTER TO YOUR CHILD AND FAMILY TO THE BEST OF OUR ABILITY.

PARENT INFORMATION

Names: _____

Primary Parent Cell Number: _____

Parent Email: _____

CHILD 1

Name: _____ Age: _____ Grade: _____

Allergies/Medical Concerns: _____

CHILD 2

Name: _____ Age: _____ Grade: _____

Allergies/Medical Concerns: _____

CHILD 3

Name: _____ Age: _____ Grade: _____

Allergies/Medical Concerns: _____

CHILD 4

Name: _____ Age: _____ Grade: _____

Allergies/Medical Concerns: _____

CHILD 5

Name: _____ Age: _____ Grade: _____

Allergies/Medical Concerns: _____

CHILD 6

Name: _____ Age: _____ Grade: _____

Allergies/Medical Concerns: _____