



Camp Fun Spot Day Care Parent Handbook  
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**Our program is licensed and our staff is screened by  
New York State Office of Children & Family Services.**

# **Day Care Parent Handbook Effective April 1, 2023**

## **Welcome to Camp Fun Spot!**

Our Staff is very excited and looking forward to a wonderful year. This handbook contains Camp Fun Spot policies and procedures, which are important to you and your child. By signing the following, you agree that you have reviewed a copy of the Day Care requirements prepared by the New York State Office of Children & Family Services. You also agree to follow the policies, procedures, and practices placed before you within the Camp Fun Spot Parent Handbook.

Camp Fun Spot is required by NYS to get immunization records and physicals for all of the children enrolled in our program. Income Eligibility Forms are also required since we are part of the Child and Adult Food Care Program (CACFP).

**Please remember to notify Camp Fun Spot if your child will not be attending camp on any regularly scheduled day.**

## Policies and Procedures

1. **Sign In and Sign Out:** All children, upon arrival at Camp Fun Spot, must be signed in; and all children being picked up from Camp Fun Spot, at any time and under ALL circumstances, **must be** signed out by his or her parent/guardian or designated pickup person.
2. **Parental Visitation:** Parents and/or guardians of enrolled/attending children are permitted to view and observe their children at any time, except during naps, while being escorted by a staff member. We only allow observation by parents of enrolled/attending children.
3. **Designated Pickup Persons:** We will only release children to persons designated by parents on the child's registration form. Parents may also provide an additional list. An ID provided by the designated pickup person must be shown to a staff member at the desk before release of the child will be permitted.
4. **Responsible for Child:** Camp Fun Spot will not assume responsibility of any child until his/her actual arrival and sign-in at The Fun Spot.
5. **Snack:** We provide a NYS regulated, hot lunch and snacks daily.
6. **Allergies:** All necessary precautions will be taken for any peanut or other food allergies. If allergies do exist to certain things, they will be prohibited from the classroom.
7. **Personal Property:** Camp Fun Spot is NOT responsible for lost, stolen or damaged items brought to camp. **All personal property must be labeled with child's first and last name.**
8. **Lost and Found:** Clothing/items left at camp at the close of each business day will be placed in Lost and Found. It is the parent's responsibility to check this area daily. All items left at month's end will be donated to charity.
9. **Change in Personal Information:** Camp Fun Spot administrative personnel **must be notified immediately** when there are any changes in the following: home telephone, work phone, address, emergency contacts, etc.
10. **Pickup:** All children must be picked up no later than 5:45 p.m. or a late fee will be charged.
11. **Parking lot Safety:** Please make sure you are turning your vehicle off when dropping off your child/children.
12. **Drills:**
  - a. **Shelter in Place:** A response to an emergency that creates a situation in which it is safer to remain in the building rather than to evacuate. It is in response to situations where the children cannot be picked up and must remain on site past the regular operating hours. In the case of an actual emergency, if The Fun Spot is unsafe, our Primary Re-Location site is next door at the Northway Brewing Company. However, for practice drills, done twice a year, we will remain at Camp Fun Spot.
  - b. **Fire Drills:** We are required by NYS to conduct monthly fire drills. When we practice them, all children and staff immediately report to the back parking lot.
13. **Video Surveillance:** Surveillance cameras are used in all daycare classrooms and the entrance hallway. The cameras are located on the ceilings. Also, cameras are mounted on the ceilings throughout The Fun Spot building and on the outside of the building to show the outside areas.
14. **VACATION POLICY:** For two weeks each year (52-week period), half price tuition will be allowed for a child that will be absent from camp for a full week. A two-week notice will be needed in order to get the discount.
15. **Discipline Policy - Definition of a Behavioral Problem:**
  1. Any behavior by a child that is viewed or deemed unsafe to the well being of himself/herself or any other person/child.
  2. The improper use of language or gestures directed to staff or other children.
  3. Damage or theft of camp property or the property of others.
  4. An overall disrespect to staff or other children.**Methods of Guidance and Discipline Used Shall:**
  1. Be positive. For example, instead of saying, "Stop kicking the table!" Say, "Please keep your feet on the floor."
  2. Shall be consistent with the age and developmental needs of the children.
  3. Lead to the child's ability to develop and maintain self control.**Behavioral Disciplinary Actions**
  1. Children may be removed from a group activity to another area, provided that the child removed is either under the direct supervision of another staff member or continuously visible to a staff member.
  2. Verbal warning from director
  3. Verbal warning from director with a written notice for parent(s) to be signed.
  4. Conference with director.
  5. Suspension or termination from Camp Fun Spot without refund.
  6. Extreme or violent behavior resulting in an injury to another child or staff member may warrant immediate termination from our program without any previous warnings.
  7. Camp Fun Spot retains the right to dismiss any student without prior written notice from or conference with the director.

8. The center will not expel a child based solely on the child's parent making a complaint to the Bureau of Licensing regarding a center's alleged violations of the licensing regulations.
9. Staff members shall not use hitting, shaking or any other form of corporal punishment of children.
10. Staff members shall not use abusive language, ridicule, harsh, humiliating or frightening treatment or any other form of emotional punishment of children.
11. Staff members shall not engage in or inflict any form of child abuse and/or neglect.
12. Staff members shall not withhold food, emotional responses, stimulation, or the opportunities for rest or sleep from children.
13. Staff members shall not require a child to remain silent or inactive for an inappropriately long period of time for the child's age.

**14. Policy On Release of Children:**

1. Each child may be released only to the parent(s) or person(s) authorized by the parent(s) to take the child from Camp Fun Spot and to assume responsibility for the child in an emergency if the parent(s) cannot be reached.
2. If a non-custodial parent has been denied access, or granted limited access, to a child by a court order, Camp Fun Spot will need to receive documentation to that effect, maintain a copy on file, and comply with the terms of the court order.
3. If the parent(s) or person(s) authorized by the parent(s) fails to pick up a child at the time of the center's daily closing, the center shall ensure that:
  - a) The child is supervised at all times.
  - b) Staff members will attempt to contact the parent(s) or person(s) authorized by the parent(s).
  - c) An hour or more after closing time, provided that other arrangements for releasing the child to his/her parent(s) or person(s) authorized by the parent(s) have failed and the staff member(s) cannot continue to supervise the child at the center, the staff member shall call the Division of Youth and Family Service's 24 hour Child Abuse Hotline (1-800-792-8610) to seek assistance in caring for the child until the parent(s) or person(s) authorized by the child's parent(s) is able to pick-up the child.
  - d) If the parent(s) or person(s) authorized by the parent(s) appears to be physically and/or emotionally impaired to the extent that, in the judgment of the director and/or staff member, the child would be placed at risk of harm if released to such an individual, the center shall ensure that the child may not be released to such an impaired individual:
    - i. Staff members will attempt to contact the child's other parent or an alternative person(s) authorized by the parent(s); and
    - ii. If the center is unable to make alternative arrangements, a staff member shall call the Division of Youth and Family Service's 24-hour Child Abuse Hotline (1-800-792-8610) to seek assistance in caring for the child.
  - e) For all childcare programs, no child shall be released from the program unsupervised except upon written instruction from the child's parent(s).

15. **Policy on the Management of Communicable Diseases:** If a child exhibits any of the following symptoms, he/she should not attend day care. If such symptoms occur at day care, the child will be removed from the classroom/area, and you will be called to pick up your child.

Severe pain or discomfort	Infected, untreated skin patches	Red eyes with discharge
Yellow eyes or jaundice skin	Difficult or rapid breathing	Blood in urine
Episodes of acute vomiting	Skin rashes lasting longer than 24 hours	Stiff Neck
Oral temperature of 101.5 degrees	Swollen joints	Acute Diarrhea
Sore Throat or severe coughing	Visibly enlarged lymph nodes	

Once the child is symptom free for 24 hours, or has a physician's note stating that he/she no longer poses a serious health risk to themselves or others, he/she may return to day care. If a child contracts any of the following diseases, please report it to us immediately. The child may not return to day care without a doctor's note stating that the child presents no risk to himself/herself or others.

**Table of Excludable Communicable Diseases:**

Strep Throat	Giardia Lamblia*	Impetigo	Mumps*
Tuberculosis*	Shigella*	Lice	Measles*
Chicken Pox	Hepatitis A*	Scabies	Meningococcus*
German Measles*	Salmonella*	Homophiles Influenza*	Whooping Cough*

Lice (must remove all eggs/nits before returning to Camp Fun Spot with note from physician)

\*Reportable diseases: If your child is exposed to any communicable diseases at our program, you will be notified in writing.

16. **Children's Code of Conduct:** While at Camp Fun Spot, children are expected abide by the following rules:
1. Quiet down when counselors use the 'quiet signal'
  2. Respect other children, staff, and property
  3. Follow all staff directions
  4. Stay with a staff member at all times
  5. Adhere to all rules regarding safety
  6. Refrain from using foul language or other forms of verbal abuse
  7. No fighting or other physical altercation
17. **Education:** If you would like your child to participate in the educational portion of the day they need to be here from 9 to 11 am for Circle Time and Centers. If you are dropping off your child during Circle Time or small group instruction please make sure you enter the classroom quietly and try not to disrupt these activities. This is a very important part of our day and does require the teachers' undivided attention. If you have something to discuss with the director, teachers or staff, please try to arrive before 9 am or set up a meeting with us at a specific time.
18. **Rest Time:** Rest Time is from approximately 12:30pm to 2:30pm. Please do not plan to pick up your child during this time as this could be disruptive to the other children. Rest mats will be supplied by the center. Parents must supply a crib sheet, labeled with the child's name, to be placed over the mat during rest time. The sheet will be removed from the mat after rest time and stored with the child's belongings. All mats will be sanitized after each use. A blanket, special friend and/or small pillow, labeled with the child's name may also be brought in. All items need to be taken home on Friday to be laundered and returned to camp on Monday. If your child becomes ill, all rest time items will need to be taken home and cleaned before the child returns to camp. Rest time schedules will not be reduced due to family schedules. This is an important time of day and is mandatory by the Office of Children and Family Services. Children will not be disturbed during rest time except in the case of an emergency.

## **Toddler Program: Age 2 to 3 years**

### **Diapers, Wipes and Soiled Clothing:**

1. Diapers and wipes, enough for one week must be supplied by the parents. There will be an additional charge for any diapers that are supplied by Camp Fun Spot.
2. Extra complete changes of clothing are needed for this age group. It is suggested that you supply two or three changes of clothing to be kept in their cubby.
3. If diaper rash cream is required, it must be provided by the parent. A written consent form must be signed and will be kept on file and is valid for six months.
4. It is requested that toddlers wear disposable diapers. Infection can be spread by leakage from cloth diapers. Cloth diapers may be used but must be laundered by the parent or a commercial company. If using cloth diapers, parents must supply all cloth diapers and waterproof covers/pullovers. Also required is a diaper pail with a lid labeled with the child's name. All cloth diapers will be placed in a plastic bag and placed in the lined diaper pail. All cloth diapers must be removed from the center at pick up time each and every day. The diaper pail must be taken home daily to be cleaned if necessary and every weekend and then returned the following week. Extra diapers and waterproof covers/pullovers must be on hand at all times. Cloth diapers must have snaps not pins. In accordance with the United States Public Health Service, any clothing that becomes soiled with bodily fluids (urine, stool, vomit and/or blood) must be placed in a sealed labeled plastic bag. This procedure is to help prevent the spread of infection that may occur from handling soiled clothing. All soiled clothing will be given to the parent at pick up time

## **Camp Fun Spot Program Dates and Fees Effective March 29, 2023**

**Invoices NOT Provided:** An invoice will not be provided unless requested. Payments should be made in accordance with the program fees outlined below.

### **DAY CARE from 7:00 am Until 5:45 pm**

#### **18 months to 5-year-olds Day Care / Preschool Program (Weekly Payment)**

<u>First Child</u>	<u>Additional Child</u>
\$300.00 - 5 days per week	\$270.00 - 5 days per week
\$260.00 - 4 days per week	\$234.00- 4 days per week
\$210.00 - 3 days per week	\$189.00 - 3 days per week
\$150.00 - 2 days per week	\$135.00 - 2 days per week

- Per school year, **Registration Fee: \$30 per child**
- **Second Child Rates:** First Child rate is charged the higher fee for the children attending, and then the 2<sup>nd</sup> child rate would apply.
- **VACATION POLICY:** For two weeks each year (52-week period), half price tuition will be allowed for a child that will be absent from camp for a full week. Two weeks notice will be needed in order to get the discount.
- **Payment Due Schedule:** All Payments are due by 5:45 pm Friday of the week prior to the start of the week attending. A late fee of \$10.00 will be assessed on any account which is not paid in full by 5:45 p.m. on the previous Friday. All payments will be automatically processed on the date due thru our Tuition Express payment processing software using a credit card or ACH payment option. A \$5.00 monthly fee will be assessed on any account that is not signed up for automatic payments. Invoices will not be provided unless requested.

## **Late Pickups**

Arrangements must be made prior to the beginning of the program. There will be a late fee if your child is picked up after 5:45 p.m. This fee must be paid at the time of late pick up on the day applicable. The following fees will apply:  
**\$10.00 after 5:45 pm ; \$25.00 after 6:00pm**

## **Camp Fun Spot Financial Policies**

1. **No Refunds or Credits Available**
2. A late fee of \$10.00 will be assessed on any account which is not paid in full by 5:45 pm on the due date
3. Payment for camp is due upon registration or before commencement of service. **(DO NOT send in with child)**
4. Payments will be applied as follows: registration fee, late fees, past due balances, then current balances.
5. A **non-refundable** registration fee of \$30.00 per child is due upon enrollment in any of the Camp Fun Spot programs.
6. Under no circumstances will Camp Fun Spot credit for absenteeism or cancellation of a child's enrollment in any of our programs.
7. In situations where the parents of a child are separated or divorced, the parent who has signed the registration packet is the parent responsible for payment.
8. **Withdrawal:** A two-week written notice is required to be given to Camp Fun Spot. Tuition will be charged for these two weeks.
9. **Returned Checks:** A \$35 fee will be assessed to your account. In the event that this situation occurs twice, cash or a money order will be required for payment for the remainder of the year.
10. **Accounts that are 2 weeks past due will result in suspension or termination of your child from Camp Fun Spot without refund.** If unusual circumstances prevent you from paying on time, please discuss the situation with the Director.
11. If outside assistance is required to collect any outstanding balances on your account, all costs incurred, including any and all attorney fees, collection fees, and/or court costs will be added to your account.
12. You will be charged each week according to the schedule you signed your child up for, whether or not your child is in attendance.
13. **For families on county assistance-** parents are responsible for paying any differential between the maximum allowable Child Care Market Rate and the actual cost of child care, including any non-covered days or hours. You pay for the spot you sign up for.

**Camp Fun Spot Day Care Closings - Care Will NOT Be provided on these dates. Camp Fun Spot will be CLOSED on the observed holiday if the holiday falls on a weekend.**

**Labor Day  
 Thanksgiving Day and the Friday after Thanksgiving,  
 Christmas Eve Day and Christmas Day  
 New Year's Day  
 Memorial Day  
 4<sup>th</sup> of July**

**Please remember to notify Camp Fun Spot if your child will not be attending camp on any regularly scheduled day.**

## **EMERGENCY PREPAREDNESS PLAN**

### **EVACUATION PROCESS**

In situations that call for a full evacuation for the center, the acting Administrator will make contact with each employee and inform them of the type of emergency.

CODE RED is for Center Lockdown and Shelter In Place  
 CODE GREEN is for an Evacuation  
 CODE BLUE is for a Lost Child

In instances where the fire alarm begins to sound, all staff are to begin the evacuation process immediately. At this time all employees are to immediately report to their designated area or classroom and begin evacuating the children. Once in the designated meeting area the Administrator will relay any pertinent information directly to the staff. If the fire alarm sounds and evacuation is not necessary, such as in instances of system checks, the Administrator will make contact with all staff prior to the scheduled test.

However, if an employee notices any emergency situation that requires an evacuation that individual is responsible for pulling the fire alarm to initiate the evacuation.

Each room will have a posted copy of that room's evacuation route blueprint. In cases requiring evacuations staff should follow the route outlined on their room's blueprint unless directed otherwise or if circumstances inhibit evacuating via that route.

### **The center will evacuate as follows:**

**Toddlers:** All teachers in the room are responsible for gathering their children and leading them out of the room. When evacuations are initiated, the teachers must direct the children to exit the building using the emergency exit in their classroom. They will proceed to the furthest corner of the parking lot. If the situation inhibits the classroom from using this exit, teachers should utilize the door located in their room, go down the hallway and out the arcade doors. Teachers should ensure they take their binder, emergency first aid kit and radio with them. Once outside of the building, the teacher will verify that each child is present and accounted for.

**Ages 3 and Pre-K:** All teachers in the room are responsible for gathering their children and leading them out of the room. When evacuations are initiated, the teachers must direct the children to exit the building using the emergency exit in their classroom. They will proceed to the furthest corner of the parking lot. If the situation inhibits the classroom from using this exit, teachers should utilize the door located in their room, go down the hallway and out the arcade doors. Teachers should ensure they take their binder, emergency first aid kit and radio with them. Once outside of the building, the teacher will verify that each child is present and accounted for.

**School Age:** When evacuations are initiated, the teachers must gather all their children and exit the building using the closest emergency exit to where they are located. They will proceed to the furthest corner of the parking lot. Teachers should ensure they take their binder, emergency first aid kit and radio with them. Once outside of the building, the teacher will verify that each child is present and accounted for.

**Staff:** All other staff present should immediately go to the Daycare rooms or After School Care area to assist the teachers in evacuating the children.

**Administrator:** Once an evacuation has commenced the administrator will immediately contact all staff and inform them of the type of emergency. However, if the fire alarms should go off, all staff should proceed according to the evacuation plan. The administrator is responsible for taking a phone, the Emergency First Aid Kit and the laptop so they have all the children's contact information and information on which children are signed into the building. Once at the designated meeting point each teacher must check their head count against sign in information to ensure all children are accounted for. The administrator will then check each class' sign in information from the office tablet and compare it to headcount outside.

In emergencies involving a fire in the building the administrator will be responsible for notifying 911 of the emergency once the building has been completely evacuated. In other emergencies not involving the presence of a fire, the administrator will notify the appropriate emergency response agencies of the emergency as soon as the building has been completely evacuated.

If called for, the administrator will utilize the information contained in the laptop to contact each child's parent/guardian regarding the emergency if pick up is necessary, detailing the pick-up location.

Each teacher is responsible for checking bathrooms, closets, and other areas where children may be hiding. It is also their responsibility to know their classes' head count at all times to ensure all children are accounted for in the event of an emergency.

Under no circumstances are the staff to stop for any of their own or children's personal belongings, including jackets, shoes, purses, etc.

## **DESIGNATED MEETING AREAS**

When exiting the building, the designated meeting area for all classes is the furthest corner of the back parking lot.

## **FIRE DRILLS**

Fire drills will be conducted monthly at various times of the day. Staff will be notified that a drill will occur at some point during the week. However, an exact date or time will not be specified.

At the time of the fire drill, the Administrator will sound the drill alarm and the center will be evacuated according to the above evacuation process.

The administrator will be responsible for timing the fire drill, in terms of how long it took to vacate the building. The completed fire drill will be documented on a log, specifying the date, time, and length of the drill once all children and staff have re-entered the building.

Once all children and staff have reached the designated meeting area, teachers must ensure all off their children are present and accounted for.

After all children and staff are accounted for, the Administrator will give the approval to reenter the building. At this point all staff will aid the children in returning to the building and back to their respective classrooms.

All Teachers are responsible for familiarizing the children in their classrooms about the fire drill. Teachers must talk to the children in their classroom about the alarm, rules, and procedures for evacuation.

## **EVACUATION FROM CENTER PREMISES**

In cases where it is no longer safe to remain on the center's premises, the administrator will initiate a center-wide evacuation by calling a code green over the radio. Code Green is for center evacuation. The staff and children will move as a group, from the designated meeting spot to the brewery located next to the center. The center and the brewery have agreed that in emergency situations where the centers' premises are no longer safe, the staff and children may seek refuge inside the brewery until the children are able to be picked up by parents/guardians or it is safe to return to the center.

## **CENTER LOCKDOWN / SHELTER IN PLACE PROCEDURES**

In the event of a natural or man-made disaster or in situations where the safety of the staff and children is in question, the staff will use the following procedures to ensure the safety of all staff and children,

The administrator will initiate a center-wide lockdown, or indicate the need to shelter in place by calling a code red over the radio. Code Red is for center lockdown and shelter in place. Immediately after being notified of a center-wide lockdown or a shelter in place all staff should begin following the appropriate procedures.

In all emergency situations, the owner and administrator shall be notified and are responsible for making the decision to shelter in place. In situation where the safety of the staff and children is in question, the administrator will begin the lockdown procedure and immediately notify the owner of the situation **once** the center is secured.

## **LOCKDOWN PROCEDURE**

When the lockdown procedure is initiated, all staff should immediately close and lock any open windows and pull down any open blinds. Doors located inside the classroom that lead to the outside should be closed and locked. Doors that are located inside the classroom that lead to the center should also be closed. Immediately after the room has been secured the teacher in the classroom will ensure that each child in their care is present and accounted for. All staff are directed to keep to keep themselves and the children away from the windows and doors until the lockdown has been lifted.

In the Pre-K classroom, the children are to sit by the wall between the exit door and the bathroom. In the toddler room, the children should along the wall between the bathroom and the corner behind the changing table. In the Pre-school classroom (3's), the children should sit along the closet doors in the corner. For school age children, they should go into the Camp Fun Spot room in the snack bar into the back section. The movable wall should be closed and both the purple and blue door should be locked.

If children are outside when a lockdown is initiated, staff will immediately take the children inside to their designated classroom. The teacher will then commence the lockdown procedure above to secure their classroom and then ensure that each child in their care is accounted for.

When a lockdown is commenced, the administrator will ensure the front entrance is locked and secured as well as the back door leading into the arcade. The administrator will then go to each classroom to check on the welfare of each teacher and child and ensure that each room is properly secured. If the situation prohibits the administrator from immediately checking on each classroom, the administrator will report to the office after securing the exits and check on each classroom as soon as possible.

## **SHELTER IN PLACE PROCEDURE**

When staff are notified of the need to shelter in place, the staff will ensure that all windows are closed and locked and pull down any open blinds. Doors located inside the classroom that lead into the hallway should be closed. Immediately after the room is secure, the teacher in the classroom will ensure that each child in their care is present and accounted for

When the center has initiated the shelter in place procedure the administrator will attempt to determine the extent of time the shelter in place will remain in effect. The administrator will make contact with the parent/guardian of each child present at the center and notify them that a shelter in place procedure has been implemented and inform them of the anticipated time in which it will be lifted. The owner and administrator shall be the primary individuals responsible for making the decision to shelter in place.

Preparations will be made in advance to ensure that enough food, water and equipment is available to sustain all children and staff for a minimum of 24 hours. In the instance that overnight stays are required, the center will accommodate all staff and children to stay overnight safely. Children will sleep on their assigned nap mats or cots with their sheets and blankets. Staff may utilize spare mats, cots and blankets.

An emergency supply of clean drinking water shall be stored in the vending machine. This drinking water should not be used to clean or wash anything as it is to be used as the sole source of fresh drinking water. Canned fruits and vegetables can be used without the need to be cooked first. However, prior to being eaten from, all cans must be wiped clean using a damp cloth. After being cleaned, an adult shall open any cans of food and aid children in eating from the can if clean dishes are unavailable. All other emergency food items can be eaten from the packaging. If a microwave is available, hot foods can be prepared in there. The center will ensure that a manual can opener is on the premises.

## **ACCOMMODATING CHILDREN WITH SPECIAL NEEDS**

In all emergency situations the staff needs to be aware of the individual needs of all children in their care. Special accommodations shall be made and followed to ensure the safety of students with special needs during emergency situations.

## **CHILDREN WITH PHYSICAL LIMITATIONS**

Staff shall be responsible for the children in their care during all emergency situations, including children with physical limitations. During emergency situations where all children and staff are required to leave the building and/or premises, special care shall be taken to ensure the safe transport of any child with physical limitations that may hinder their ability to exit the building or premises. Staff shall assist any ambulatory child/children out of the building using the necessary means of physical support. For any child/children who are non-ambulatory, staff will ensure that the child/children are transported out of the center and off the premises using the appropriate equipment. For any child that is wheelchair bound, staff will assist the child out of the center and off the premises if necessary. For any child/children who are non-ambulatory and do not have access to a wheelchair, staff will utilize any moveable equipment available (chairs, strollers etc) to evacuate the child/children from the center and premises.

## **CHILDREN WITH COGNITIVE LIMITATIONS**

Staff shall be responsible for the children in their care during all emergency situations, including children with cognitive limitations. Special care shall be taken to ensure that any and all children with cognitive limitations are evacuated from the building/premises safely. Staff shall take into consideration the emotional needs of any child, including children with cognitive limitations. Staff shall ensure that all children are comforted during stressful situations, including emergency situations. Staff shall ensure they remain in close proximity to any child with cognitive limitations that may cause the child to leave the group or potentially go to an unsafe area.

## **CHRONIC ILLNESS**

Staff shall ensure that all children who are chronically ill remain with their assigned staff member during emergency situations. Staff shall take the necessary precautions to ensure any chronically ill child is safely guided/transported out of the building/off the premises during emergency situations. Staff shall also ensure that any and all necessary medical equipment/medication is taken with the child when leaving the building/premises during an emergency.

## **LOST CHILD PROCEDURES**

If a child is not accounted for at any time, the staff member responsible for the child should immediately begin searching the premises for the child. Also, the administrator should be immediately notified that a child is missing. Each area that the child could potentially hide inside and outside of the center should be searched. The administrator should double check that the child was not picked up by a parent/guardian.

The administrator will notify all staff to begin a Lockdown Procedure by calling a Code Blue. All exits will be monitored by staff letting no one in or out of the facility.

The staff member responsible for the child will call 911 since he/she will have the best knowledge of what the child was wearing that day along with distinctive features. The following information should be written down:

- Child's name, age, height, weight, date of birth, and hair color
- Child's clothing that he/she was wearing that day and any other distinguishing features
- The time at which the child was noticed missing
- If child abduction is suspected, note if there were any suspicious vehicles or persons located around the child care facility

The administrator will notify the parents/guardians of the child that the child is missing from the facility.

While the police are in route to the facility, the staff of the center will continue to search for the missing child looking in every cabinet, closet, cubby and every other location where the child may be.

The administrator will stay on the center premises at all times to be the contact person for the police department and the parents/guardians.

The police should be asked to activate Amber Alert by the facility administrator.





Dear Parent, Guardian or CACFP Participant,

This center participates in the Child and Adult Care Food Program (CACFP) and provides healthy meals at no cost to all children and adults enrolled in the daycare center. By completing and returning the attached Income Eligibility Form, you will help your center receive money from CACFP for the meals that are served. If your household's income is equal to or less than the amounts indicated for your household size on the chart below, the center will receive a higher rate of funding for the meals served. The Income Eligibility Form needs to be completed every year. Your center and CACFP will keep all information private.

**INCOME ELIGIBILITY GUIDELINES  
(Effective July 1, 2022 until June 30, 2023)**

HOUSEHOLD SIZE	REDUCED-PRICE MEALS		
	YEAR	MONTH	WEEK
1	25,142	2,096	484
2	33,874	2,823	652
3	42,606	3,551	820
4	51,338	4,279	988
5	60,070	5,006	1,156
6	68,802	5,734	1,324
7	77,534	6,462	1,492
8	86,266	7,189	1,659
FOR EACH ADDITIONAL FAMILY MEMBER	+8,732	+728	+168

\_\_\_\_\_  
SPONSOR/CENTER OFFICIAL

\_\_\_\_\_  
SPONSORING ORGANIZATION

\_\_\_\_\_  
DATE

This institution is an equal opportunity provider.



See INSTRUCTIONS on reverse.

**CHILD CARE CENTER NAME** \_\_\_\_\_

Print the name of the child(ren) enrolled in this child care center

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**DIRECTIONS**

**Complete SECTION A if anyone in your household**

1. Participates in the Supplemental Nutrition Assistance Program (SNAP)
2. Receives Temporary Assistance to Needy Families (TANF)
3. Participates in the Food Distribution Program on Indian Reservations (FDPIR) OR
4. Is a foster child

**SECTION A**

SNAP Case # \_\_\_\_\_

TANF # \_\_\_\_\_

FDPIR # \_\_\_\_\_

Names of Foster Children \_\_\_\_\_  
\_\_\_\_\_

**An adult household member must sign the application before it can be approved.** After reading the following statement and the statement on the back, sign below.

I certify that the above information is true. I understand that the center will get Federal funds based on the information I give.

Signature \_\_\_\_\_

Date \_\_\_\_\_

FOR SPONSOR USE ONLY	
CACFP Agreement # _____	
Total Number of Household Members _____ <small>(INCLUDING FOSTER CHILDREN, IF APPLICABLE)</small>	
Total Household Income \$ _____	
Free _____	Reduced _____ Paid _____
Date of Determination _____	
Signature of Center Staff _____	

**Complete SECTION B if no one in your household** participates in SNAP, receives TANF, participates in FDPIR or if none of the children enrolled in the child care center is a foster child.

**SECTION B**

List all household members below. Include yourself and all adults and children NOT listed above, even if they do not receive income. Then list all income received **last month** in your household in the column to the right. Gross income includes: earnings from work, pensions, retirement, Social Security, child support, foster child's personal income and any other sources of income.

HOUSEHOLD MEMBER NAME	MONTHLY GROSS SALARY
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
7. _____	\$ _____

**An adult household member must sign the application before it can be approved.** After reading the following statement and the statement on the back, sign below.

I certify that the above information is true and that all income is reported. I understand that the center will get Federal funds based on the information I give.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

LAST FOUR (4) DIGITS OF SOCIAL SECURITY NUMBER     DATE \_\_\_\_\_

USDA is an equal opportunity provider and employer.

**Privacy Act Statement:** The Richard B. Russell National School Lunch Act requires the information on this form. You do not have to give the information, but if you do not, we cannot approve the participant for free or reduced-price meals. You must include the last four digits of the Social Security Number of the adult household member who signs the form. The Social Security Number is not required when you: apply on behalf of a foster child; provide a SNAP, TANF or FDPIR number; or when you indicate that the adult household member signing the form does not have a Social Security Number. We will use your information to determine if the center is eligible for free or reduced-price meal reimbursement and for administration and enforcement of the Program.

### **INSTRUCTIONS FOR COMPLETING DOH-3688**

#### **Definition of Income**

*Income* means income before deductions for income taxes, social security taxes, insurance premiums, charitable contributions, and bonds, etc. It includes the following: (1) monetary compensation for services, including wages, salary, commissions or fees; (2) net income from non-farm self-employment; (3) net income from farm self-employment; (4) Social Security payments; (5) dividends or interest on savings or bonds, income from estates or trusts or net rental income; (6) unemployment compensation; (7) government civilian employee or military retirement, or pensions or veteran's payments; (8) private pensions or annuities; (9) alimony or child support payments; (10) regular contributions from persons not living in the household; (11) net royalties; (12) military benefits received in cash, such as housing allowance except if you are in the Military Housing Privatization Initiative; and (13) any other cash income.

#### **Definition of Household**

Household means *family* as defined in Section 226.2. *Family* means a group of related or non-related individuals who are not residents of an institution or boarding house, but who are living as one economic unit.

#### **INSTRUCTIONS FOR PARENTS OR GUARDIANS**

Write in the name of the child care center in the space provided.

Print the name of each child in your household who attends this child care center.

**Section A:** If anyone in your household participates in the Supplemental Nutrition Assistance Program (SNAP), receives Temporary Assistance for Needy Families (TANF) or participates in the Food Distribution Program on Indian Reservations (FDPIR), complete Section A only. Write down the SNAP, TANF or FDPIR number (do not use your ACS or DSS child care subsidy number). Then sign and date the form and return it to the day care center.

**Foster children:** If your household includes a foster child who is in child care, write in the names of the foster children.

**Section B:** Complete this section if you did not complete Section A. Write in your name and the names of all other adults and children living in the household, including unrelated people, even if they do not have any income. Do not include the children in child care who are listed at the top of the form.

Enter the amount of income each person received **last month**, before taxes or anything else was taken out. Refer to the Definition of Income and the Definition of Household, above. If any amount last month was more or less than the usual, write in that person's usual income.

The last four digits of the Social Security Number of the adult signing the certification is required. If you do not have a Social Security Number, write *none*. The form must be signed by an adult member of the household.

#### **INSTRUCTIONS FOR CENTERS AND SPONSORS**

**The For Sponsor Use Only section is to be completed, signed and dated by center or sponsor staff.** The sponsor/center representative must review the income eligibility form and ensure that it is completed as indicated in the instructions above. Then indicate the following:

##### **The CACFP Agreement Number.**

**Total Number of Household Members** – This item does not have to be completed if the parent completed Section A. Add those indicated in Section B (if completed) to the children enrolled in child care and the number of foster children, if applicable.

**Total Household Income** – This item does not need to be completed if the parent completed Section A. Indicate the total monthly income as calculated from Section B. If the parent chooses not to disclose income, the form must be categorized as *paid*.

**Number of Free, Reduced or Paid** – Compare the total household income and the total number of household members with the current year's Income Eligibility Guidelines (CACFP-3687) to determine if the household should be categorized as **Free, Reduced or Paid**. Use the appropriate column on the CACFP-3687 to categorize their income. For example, if the parent indicated biweekly income, multiply this amount by 26 to determine yearly income.

Incomplete forms (missing signatures, income information, last four digits of Social Security Number or SNAP, TANF or FDPIR numbers) are categorized in the paid category.

**The income eligibility form is valid until the last day of the month one calendar year from the date it is signed by the household member.** For example, a form signed on May 12, 2014 is valid until May 31, 2015.

# Automated Payment Processing



Safe. Convenient. Easy.

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

## ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT AND CREDIT CARD

I (we) hereby authorize (business name) \_\_\_\_\_ to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

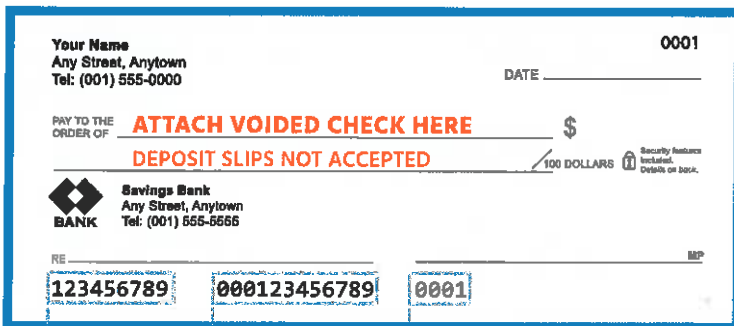
### COMPLETE ONE SECTION ONLY

#### SECTION A (Credit Card)

Cardholder Name	Phone #		
Cardholder Address	City	State	Zip
Account Number	Expiration Date		
Cardholder Signature	Date		

#### SECTION B (Bank Account)

Your Name	Phone #			
Address	City	State	Zip	
Bank or Credit Union Name	Bank or Credit Union Address	City	State	Zip
Routing Transit Number (see sample below)	Account Number (see sample below)	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	
Authorized Signature	Date			



<b>FOR OFFICIAL USE ONLY</b>
_____
<b>Date Received</b>
_____
<b>Employee Signature</b>

ROUTING NUMBER

ACCOUNT NUMBER

CHECK NUMBER

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## Camp Fun Spot Day Care Registration

Child's Full Name \_\_\_\_\_ Nickname \_\_\_\_\_  
Gender: Male Female Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone \_\_\_\_\_

Mother's Full Name \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Mother's Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Mother's Home Phone \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Mother's Employer \_\_\_\_\_  
Employer's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Mothers Occupation: \_\_\_\_\_  
Hours at work: \_\_\_\_\_ to \_\_\_\_\_ Days at work: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ ext. \_\_\_\_\_ Cell # \_\_\_\_\_ SSN: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Father's Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Father's Home Phone \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Father's Employer \_\_\_\_\_  
Employer's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Father's Occupation: \_\_\_\_\_  
Hours at work: \_\_\_\_\_ to \_\_\_\_\_ Days at work: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ ext. \_\_\_\_\_ Cell # \_\_\_\_\_ SSN: \_\_\_\_\_

Parent's Marital Status: Married Separated Divorced Single Widowed  
Child Lives With \_\_\_\_\_ If Divorced, Who Has Legal Custody \_\_\_\_\_  
May the Non-Custodial Parent Pickup Child \_\_\_\_\_

### Child Pick Up Form

The following people (other than parents/guardian) also HAVE permission to pick-up the child named above from Camp Fun Spot. It is the parent's responsibility to notify Camp Fun Spot in writing of any changes.

1. Name: \_\_\_\_\_ DL #: \_\_\_\_\_ Relation: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_
2. Name: \_\_\_\_\_ DL #: \_\_\_\_\_ Relation: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_
3. Name: \_\_\_\_\_ DL #: \_\_\_\_\_ Relation: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

B. The following people **MAY NOT** pick-up my child(ren) from Camp Fun Spot.

1. Name: \_\_\_\_\_ DL #: \_\_\_\_\_ Relation: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_
2. Name: \_\_\_\_\_ DL #: \_\_\_\_\_ Relation: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Note: Any person unfamiliar to me will be required to show proof of identification. Under NO circumstances will the child be released to anyone other than those listed above without WRITTEN permission from the parent.

**Emergency Contact Information**

Primary Emergency Contact (other than parents/guardian):

Name \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Emergency Contact Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_

Secondary Emergency Contact (other than parents/guardian):

Name \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Emergency Contact Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_

Third Emergency Contact (other than parents/guardian):

Name \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Emergency Contact Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_

**Photography Permission**

The Fun Spot occasionally uses photography/video for publicity purposes. We would like your permission to photograph/video you/your relatives for possible inclusion in our publications, website and other publicity material. The image(s) will remain the property of The Fun Spot and will be used for the designated purpose of promoting The Fun Spot.

Name of parent/guardian: \_\_\_\_\_

I permit The Fun Spot, to use photographs/videos of me/my relatives in The Fun Spot's publications and publicity material.

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

**Neosporin & Sprays Permission**

I \_\_\_\_\_ give permission for the staff at Camp Fun Spot to apply topical ointments, spray on sun screen, and spray on bug spray to \_\_\_\_\_ when they deem necessary.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**The Fun Spot Activities Permission**

I \_\_\_\_\_ give permission to \_\_\_\_\_ to participate in any of The Fun Spot activities during Camp Fun Spot (Example: Roller Skating, Playground, Go Karts, Adventure Golf, and Laser Tag.)

Parent/Guardian Signatures: \_\_\_\_\_ Date: \_\_\_\_\_

**Transportation Permission:** I give permission for \_\_\_\_\_ to be transported by Camp Fun Spot and contracted providers chosen by them to and from Camp Fun Spot. I also authorize Camp Fun Spot to transport my child at any time Camp Fun Spot chooses for daily excursions without notifying parent or guardian. Walking excursions are also permitted in and around the surrounding property/buildings of Camp Fun Spot and the Town of Queensbury. A child will never be left unattended in any motor vehicle or other form of transportation. Every child will board or leave the vehicle from the curbside of the street. Each child will be secured in safety seats or safety belts as required by law. Safety seats will be supplied by Camp Fun Spot. Drivers will be 18 years of age or older and hold a current valid license to drive the class of vehicle they are operating. All vehicles used to transport children must have a current registration and inspection sticker. Parents are provided a copy of this plan at enrollment. If the plan changes, the parents will be provided a copy of the amended transportation plan, prior to its start date. The use of cell phones or any other electronic device during transport, including hands free devices, is prohibited. Necessary calls will be made once the vehicle is parked in a legally permitted position off the road. During the transport of children, the program will adhere to the required ratio of caregivers to children at all times as determined by regulations.

I have been informed of and agree to the above transportation plan for Camp Fun Spot



Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Rest / Nap Permission:** I give permission for \_\_\_\_\_ to rest / nap on a mat in their daycare room. They will be supervised by a CFS Staff member.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Emergency Release / Consent to Medical Treatment**

In a true emergency, a child may need to be treated without parental consent. I hereby give my permission that in my absence, Camp Fun Spot Staff may act on my behalf regarding the treatment of my child. I also give permission for my child to be transported by car or ambulance to an emergency center for treatment. In the event that I cannot be contacted immediately and a delay would result in increased risk to the child's life or health, medical or surgical treatment can be administered to my child as prescribed by a treating physician.

Parent/Guardian Signatures: \_\_\_\_\_ Date: \_\_\_\_\_

**Camp Fun Spot will not be responsible for paying for the child's health care.**

Child's Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Child's Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

Child's Hospital / Medical Care Facility: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

Regular Medications: \_\_\_\_\_

Medicine Allergies: \_\_\_\_\_

Food Allergies: \_\_\_\_\_

Any other Allergies: \_\_\_\_\_

Any special health conditions: \_\_\_\_\_

**Overview of Care Needs, please choose one option**

Full Week: Monday thru Friday \_\_\_\_\_

Part Time: Mon/Wed/Fri \_\_\_\_\_ or Tues/Thurs \_\_\_\_\_

Comments: \_\_\_\_\_

**CAMP FUN SPOT CANNOT ACCEPT THIS REGISTRATION FORM AND WE CANNOT RESERVE A SPOT FOR YOUR CHILD IN OUR PROGRAM UNTIL:**

1. This registration form is completely filled out and accepted by Camp Fun Spot.
2. In compliance with PHL2164, we are required to collect immunization records for your child. Required immunization records can be found on the 22-23 NYS Immunization Requirements. If your child is unable to receive all required vaccinations due to medical exemptions, please provide the Medical Exemption Statement for children 0-18 years of age. This form must be updated each year.
3. A NYS Blue Card will be provided to you. It must be filled out and signed in person at The Fun Spot.
4. The \$30.00 registration fee and payment for the first week your child will be attending.

I understand this is a legally binding document. I have read and understand all Camp Fun Spot policies and procedures.

**Signatures:**

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

CFS Provider: \_\_\_\_\_ Date: \_\_\_\_\_

## Enrollment Requirement Check Sheet - Staff Use Only

All personal information will be kept confidential, unless required to be given to the appropriate staff to meet your child's individual needs.

### **STAFF NOTE: Please Initial as Received**

- \_\_\_\_\_ **Camp Registration**
- \_\_\_\_\_ **Child's Pick-Up Form**
- \_\_\_\_\_ **Emergency Contact Information (a minimum of 1 contact person)**
- \_\_\_\_\_ **Photography Permission**
- \_\_\_\_\_ **Neosporin & Sprays Permission**
- \_\_\_\_\_ **Fun Spot Activities Permission**
- \_\_\_\_\_ **Transportation Permission**
- \_\_\_\_\_ **Nap/Rest Permission**
- \_\_\_\_\_ **Emergency Release/Consent to Medical Treatment**
- \_\_\_\_\_ **Child's Medical Information**
- \_\_\_\_\_ **Overview of Care Needs**
- \_\_\_\_\_ **Signed Handbook Acknowledgment Form** - form must be signed by parent or legal Guardian.
- \_\_\_\_\_ **NYS Blue Card filled out and returned**
- \_\_\_\_\_ **Income Eligibility Form**
- \_\_\_\_\_ **Immunization Form from Doctor**
- \_\_\_\_\_ **Copy of Last Physical**
- \_\_\_\_\_ **Payment** – Each child's annual registration fee of \$30.00 must be received.
- \_\_\_\_\_ **Payment** – Each child's first week's payment and field trip fees for that week must be received.

\*\*\*Please return this registration form to the parent / guardian if all of the above items are not initialed\*\*\*