Parks' Place Daycare & Learning Center

Enrollment/ Registration Information Summer 2025

Entrance to the program is based upon availability of space (All applicants will be notified)

Child's Last Name: _____ **MI:** _____ **First Name:** _____

Grade: _____ **Gender: M/F DOB:** _____/____/_____ **Age:** _____

Race: ___ White/Caucasian ___ Native American ___ Asian/Pacific ___ Other

___ African American ___ Hispanic ___ Multiracial

Street Number: _____ **Street Name:** _____

Apt#: _____ **Zip Code:** _____

Parent/Guardian/Foster Care/ Information:

Name: _____**Home Phone #:** _____ - _____- _____

Work Phone # or Cellphone#: _____ - _____- _____ (Please include area code)

Family Arrangement:

___ 2 Parents ___ Single Female ___ Single Male ___Foster Care ___ Relative

Person(s) authorized to pick-up child: (Please Circle) **Mother:** YES or NO **Father:** YES or NO

Person to be contacted in case of illness, accident, emergency and authorized to remove the child from the facility in the absence of a parent/guardian. If a child's biological parent is not allowed to pick a child up, please provide the necessary documentation, i.e. notarized statement or judgement.

If no one other than the parent or legal guardian is allowed to pick up your child, please indicate: _____ None

The following person(s) listed are authorized to pick up my child (ren)

Name: _____ **Address:** _____

Phone #: _____ - _____- _____ **Relationship:** _____

Name: _____ **Address:** _____

Phone #: _____ - _____- _____ **Relationship:** _____

Name: _____ **Address:** _____

Phone #: _____ - _____- _____ **Relationship:** _____

Name: _____ **Address:** _____

Phone #: _____ - _____- _____ **Relationship:** _____

Does your child have any special medical needs? _____ Yes _____ No

(if "Yes" please, explain): _____

Parks' Place Daycare & Learning Center will not assume the responsibility of issuing medications to any students. If it is deemed that we are incapable of providing routine, necessary care due to mental or physical incapacity program participation may be denied.

Physician's Name: _____ **Phone #:** _____ - _____- _____

Does your child have any behavior issues that we should be concerned about? ____Yes ___No

(If "Yes" please, explain): _____

Is your child currently taking medication to alter or modify behavior and/or mood? __Yes __No

(If "Yes" please, explain): _____

Please review the following. A signature from the parent/guardian is required in order to ensure your child's participation.

General Release of Liability:

In consideration of being allowed to participate in any related events and activities the undersigned agrees to the following:

I acknowledge and fully understand that each participant will be engaging in activities that may involve risk or serious injury; including permanent disability and severe social and economic losses, which might result not only from their actions, inactions or negligence, but the actions, inactions or negligence of others, the rules of play or the condition of the premises or of any equipment used. Further, that there may be risks not known to us or not reasonably

foreseeable at this time. To the best of my knowledge, my daughter/son is physically fit to engage in the activity in question. I understand that Parks' Place Daycare & Learning Center and their volunteers and agents will exercise reasonable care while my daughter/son is in their duty of care, relating to my daughter/son for personal injury or illness that may be suffered or any loss of property that may occur to my daughter/son while participating in the Summer Program.

Authorization for Emergency Care:

In case of accident or serious illness, and the program site in unable to reach me, I hereby authorize Parks' Place Daycare & Learning Center to contact the physician indicated on the application and to follow his/her instructions: If it is impossible to contact this physician, PPLC may make whatever arrangements necessary to provide care and treatment for my child.

In case of accident/serious illness where the immediate treatment of my child is not necessary, but he/she is unable to remain in the program, I will be contacted, or transportation arrangements will be made for my child. If the program is unable to reach me, I authorize PPLC to contact one of the persons indicated on the enrollment form and ask them to pick up and transport my child home.

Photo/Media Release:

I acknowledge and understand that publicity activities such as interviews, photos, and videotaping may occur. I consent and permit y child, as a participant in the PPLC program and events, to be photographed, videotaped, and/or interviewed for publicity activities.

Parks' Place Daycare & Learning Center Authorization:

I give Parks' Place Daycare & Learning Center staff the authorization to review my child's school records

(Application is not considered complete unless signed below to indicate agreement with all of the above)

_____ _____

Child's Name (Print) Date

_____ _____ _____

Parent or Legal Guardian Name (Print) Parent or Guardian Signature Date

Parks' Place Daycare & Learning Center
Summer Camp

Attendance Policy

Our summer camp staff is committed to helping students succeed while providing a sage place to learn and grow. In turn, it is very important to have students, staff, and parents abide by the summer cap policies.

The summer camp operates from 8:00 AM – 4:30 PM, Mon- Fri. It is imperative for students to attend daily. If an event should happen where a student must miss a day, it is the parents/guardians' responsibility to provide a note. Consistent absences without notice will result in immediate termination from the Summer Camp. We will not hold any sports for anyone.

Finally, it is very important that all students be picked up on time. Parents/Guardians who will be picking up the students from the summer camp must be at least 18 years of age. If you cannot pick your child up for any reason and you send someone, the person picking up your child must be on the authorized to remove child sheet and have a valid ID. Summer Camp ends at 4:30 PM and the grounds will be cleared by 4:35 PM. Please make proper arrangements to have your child/children picked up in a timely manner. If the child/children are not picked up by 4:35 PM, the following actions will take place:

- First Offense — Verbal Warning
- Second Offense — Written Warning
- Third Offense — Minimum Days allow during Summer Camp (2 days per week)
- Fourth Offense — 3 Days Suspension
- Fifth Offense — Remove from the summer camp

We sincerely hope with your cooperation that all students can benefit from the entirety of the summer camp. If you have any questions, please contact the Director Joanne Parks (904)-908-6926

** I am aware of the above summer camp policies and procedures. I understand that each incident will be handled with these actions, and I agree to abide by these policies.

_____ _____ _____

Parent Signature | Student Name | Date

Parks' Place Daycare & Learning Center
Summer Camp

Behavior Policy

Our staff is committed to helping students while providing a safe place to learn and grow. We strive to teach students to be responsible for their own behavior.
In the event, that a student exhibits less than satisfactory behavior, the following actions will take place:

- First Offense — Verbal Warning
- Second Offense — Written Warning
- Third Offense — 3 Days Suspension
- Fourth Offense — Minimum Days allow during Summer Camp (2 days per week)
- Fifth Offense — Remove from the summer camp

We sincerely hope with your cooperation that all students can benefit from the entirety of the summer camp. If you have any questions, please contact the Director Joanne Parks (904)-908-6926

** I am aware of the above summer camp policies and procedures. I understand that each incident will be handled with these actions, and I agree to abide by these policies.

_____ _____ _____

Parent Signature | Student Name | Date

Parks' Place Daycare & Learning Center
Summer Camp

Cellphone/Technology Policy

Cellphones and other electronic devices have become a way of life, a technological convenience that has impacted all of our lives in one way or another. At Park' Place Daycare & Learning Center, safety, program quality, and fostering positive social interactions as summer camp are our highest priorities.
For camper safety, privacy, and overall well-being, we ask that our camp families support our cellphone/technology policy, so we can promote a healthy summer camp environment.
Typically, campers are not permitted to bring cellphones (or any electronic/web-linked devices) to summer camp, as we do not permit their use during the school day. However, due to the unique nature of the summer camp, we will permit your camper to bring a cellphone, if they agree to and abide by the policy on appropriate use of cellphones and electronic devices.

Parent Responsibility:
We ask that you do not call or text your child during the day. If you have an urgent message for your child, please call the camp director at (904)-908-6926. We will relay any urgent information to your child immediately.
If a camper brings a cellphone during their summer camp adventure, he/she will be asked to put their phone in their backpack/purse/pocket with it powered off or on silent. Cellphones may be taken out for photos when campers have reached their field trip destination, or if **explicitly** allowed by a camp staff member.

Student/Camper Responsibility:
Campers are required to abide by the following Cellphone/Electronic Device Policy:
The unacceptable use of person electronic devices includes, but it not limited to, the following, which are prohibited:

- Unless explicitly allowed by a staff member, cellphones and other electronic devices are prohibited during academic and enrichment time.
- Using a personal electronic device to harass, bully, abuse, threated, or defame the character of another.
- Using a personal electronic device to engage in, support, or promote harassment or discrimination of an individual in violation of any the PPLC policies.
- Using a personal electronic device to send messages, images, social media/website postings, or other content of another.
- The making, attempting to make, sharing, or distribution of an audio or visual recording, or photographing of, any person(s) without the knowledge and consent of all such

person(s) such as on social media apps like TikTok, Snapchat, Twitter, Facebook, or Instagram.
- Disrupting or disengaging from a PPLC sponsored activity by using a personal electronic device.

In the event that a camper/student exhibits unacceptable cellphone/electronic device behavior, the following actions will take place:

- **First Offense: Verbal Warning** The camper's cellphone will be confiscated by a summer camp staff member and held with the PPLC Director or Lead Teacher until the end of the summer camp day. Before being allowed to pick up their phone at the end of the day, campers must discuss and review the cellphone/electronic device policy with a summer camp staff member.
- **Second Offense: Written Warning with 3-day Suspension** The camper's cellphone will be confiscated and held with the PPLC Director or Lead Teacher until the end of the summer camp day. The campers' parents will be contacted and informed of the refusal to follow the summer camp cellphone policy. Campers may pick up their phone at the end of the day. The camper will receive a written warning with a 3-day cellphone/electronic device suspension.
- **Third Offense: Two Week Suspension** The camper's cellphone will be confiscated and held with the PPLC Director or Lead Teacher until the campers' parents are able to come to pick it up. The student will be prohibited from bringing their cellphone back to summer camp for two weeks.

Please Note:

Parks' Place Daycare & Learning Center is not responsible for what happens to any devices brought to summer camp. Our campers participate in many wonderful activities at summer camp which require socialization, full engagement, and focus in order to get the best experience possible. Our goal is to create a safe environment, conducive to learning, and free of all distractions that may hinder the learning process and joy of summer camp. Thank you for your continued support and cooperation.

I am aware of the above PPLC Cellphone/Electronic Device Policy. I understand that each incident will be handles with these actions, and I agree to abide by these policies.

_____ _____ _____

Parent Signature Student/Camper Name Date

***The summer camp administration reserves the right to adjust these consequences on a case-by-case if needed. For example, extreme behaviors that break the law or engaging in bullying or harassment of other students may result in immediate suspension.*