



## The Early Childhood Program Registration 2017 - 2018

Family Name \_\_\_\_\_ Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Home Phone \_\_\_\_\_

Mom's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Dad's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_

**Permission:** I hereby give permission for my child to participate in all of the Early Childhood Program activities. I understand that the Early Childhood Program at Temple Beth Ahm Yisrael (ECP) does not assume responsibility for injury. \_\_\_\_\_ (Initial)

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Early Childhood Program Payment Form

Parent's Name \_\_\_\_\_

Child's Name(s) \_\_\_\_\_

Program Enrollment: \_\_\_\_\_

(Please include age, days, and hours your child will be attending.)

### Payment Plan Options

Pay in full at time of registration with a check (payable to Temple Beth Ahm Yisrael), cash or Credit Card; (Receive a 1.5% discount on total school tuition)

I am enrolling more than one child in the ECP for the school year and will receive a 5% sibling discount.

Automatic Monthly Credit Card Payments – Beginning August, 2017. Draft will occur on the 15<sup>th</sup> of each month.

I will pay bring in monthly payments. Payments are due on the 1<sup>st</sup> of each month. A \$25 late fee will be applied for payments received after the 15<sup>th</sup> of the month.

Check                       Cash                       Credit Card (Visa/Master Card)

Name on Card \_\_\_\_\_

Exp. Date \_\_\_\_\_

Card Number \_\_\_\_\_

CID (security code) \_\_\_\_\_

Street Address \_\_\_\_\_

Zip Code \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

TBAY Early Childhood Program  
2017-2018 Tuition Rates  
Pre-K Program

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

Class	Days	Times	10 mo. tuition	Monthly
Pre K	M-F	9am-12pm	\$4578.75	\$457.88
4 yrs old by 12/1/2017	M-F	12pm-2:30pm	\$3,815.60	\$381.56
	M-F	Early Bird 7am-9am	\$2,220.00	\$222.00
	M-F	After Care: 2:30pm-4pm	\$1,665.00	\$166.50
	M-F	After Care: 2:30pm-6pm	\$3,885.00	\$388.50

Check the boxes needed for the program you are selecting

A \$200 **non-refundable** deposit is due at time of registration. This deposit will be deducted from the first month's tuition payment.

**PLEASE COMPLETE AND RETURN BEFORE MARCH 1, 2017.**

REGISTRATION IS COMPLETE ONLY WHEN ALL THE REQUIRED FORMS ARE RETURNED.

NO INCOMPLETE REGISTRATION FORMS WILL BE PROCESSED.

In the event my child (ren) will need to be withdrawn from the TBAY ECP Program for any reason, I must give 30 days

written notice. If 30 days' notice is not received by TBAY, I understand I am financially responsible for the upcoming month of tuition. \_\_\_\_\_ (Initial)

School begins on Thursday September 7, 2017.

Pre-K tuition **does not** include our Vacation Day Programs.

You are more than welcome to register your child for these programs for an additional fee.

If Walton School is closed and TBAY has a regular school day, your child may attend their regular registered hours.

If you need additional hours, the rate is \$10 per hour.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

# EMERGENCY PICK UP FORM

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

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

The following people have my permission to pick up my child(ren):

1. Name: \_\_\_\_\_

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

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

2. Name: \_\_\_\_\_

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

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

3. Name: \_\_\_\_\_

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

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

4. Name: \_\_\_\_\_

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

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

Parent's Signature: \_\_\_\_\_

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

## EMERGENCY TREATMENT FORM

Authorization: I hereby give permission to the medical personnel selected by Temple Beth Ahm Yisrael to secure and administer treatment, including x-rays, routine tests and hospitalization for the child named below:

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

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

Mom Work #: \_\_\_\_\_ Dad Work #: \_\_\_\_\_

Emergency Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Emergency Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Doctor's Name and Address: \_\_\_\_\_

Phone # \_\_\_\_\_

Dentist's Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Hospital: \_\_\_\_\_ Phone # \_\_\_\_\_

### Allergies

Hay Fever	_____
Insect Stings	_____
Penicillin	_____
Other Drugs	_____
Dairy Products	_____
Peanuts	_____
Tree Nuts	_____
Other	_____
Food	_____

Do you carry family medical/hospital insurance? \_\_\_\_\_

Carrier: \_\_\_\_\_

Policy or Group # \_\_\_\_\_

Parent Signature: \_\_\_\_\_

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

TBAY Early Childhood Program

CONSENT FORMS

\_\_\_\_\_ At times we enjoy exploring in our backyard or around the corner. Please sign this consent form allowing your child permission to walk around the grounds of the Temple.

\_\_\_\_\_ I give permission for the following people to drive my child home from school.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

\_\_\_\_\_ **Photo Permission:** I hereby give permission to Temple Beth Ahm Yisrael, and all persons acting within its permission, the absolute and unrestricted right to obtain, use, copyright, and/or publish photographic pictures of the above-named person, whether such pictures are still or moving.

\_\_\_\_\_ **Website:** I give permission for my child's picture to be used on the Early Childhood Program's Facebook page. Questions or concerns call Sandi Newman 973-376-0539 x22

\_\_\_\_\_ **School Directory:** I give permission for my name address and email address to be put into the Early Childhood Program's directory.

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

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

Parent's Name \_\_\_\_\_

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

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

## **Expulsion Policy**

Unfortunately, there are sometimes reasons we have to expel a child from our program either on a short term or permanent basis. We will do everything possible to work with the family of the child in order to prevent this policy from being enforced. The following are reasons we may have to expel or suspend a child from this center:

Immediate causes for expulsion:

- Child is at risk of causing serious injury to other children or himself/herself.
- Parent threatens physical or intimidating actions toward staff members.
- Parent exhibits verbal abuse to staff in front of enrolled children.

Parental actions for child's expulsion:

- Failure to pay/habitual lateness in payments.
- Failure to complete required forms including the child's immunization records.
- Habitual tardiness when picking up your child.
- Verbal abuse to staff.

Child's actions for expulsion:

- Failure of child to adjust after a reasonable amount of time.
- Uncontrollable tantrums/ angry outbursts.
- Ongoing physical or verbal abuse to staff or other children.
- Excessive biting.

Schedule of expulsion:

- If remedial actions have not worked, the child's parent/guardian will be advised verbally and in writing about the child's or parent's behavior warranting an expulsion.
- An expulsion action is meant to be a period of time so that the parent/ guardian may work on the child's behavior or come to an agreement with the center.
- The parent/guardian will be informed regarding the length of the expulsion period.
- The parent/guardian will be informed about the expected behavioral changes required in order for the child or parent to return to the center.
- The parent/guardian will be given a specific expulsion date that allows the parent sufficient time to seek alternate child care (approximately one to two weeks depending on risk to other children's welfare or safety).
- Failure of the child/parent to satisfy the terms of the plan may result in permanent expulsion from the center.

A child will not be expelled:

If a child's parent(s):

- Made a complaint to the Office of Licensing regarding a center's alleged violations of the licensing requirements.

- Reported abuse or neglect occurring at the center.
- Questioned the center regarding policies and procedures.
- Were not given sufficient time to make other child care arrangements.

Proactive actions that will be taken in order to prevent expulsion:

- Staff will try to redirect child from negative behavior.
- Staff will reassess classroom environment, appropriateness of activities and supervision.
- Staff will always use positive methods and language while disciplining children.
- Staff will praise appropriate behaviors.
- Staff will consistently apply consequences for rules.
- Child will be given verbal warnings.
- Child will be given time to regain control.
- Child's disruptive behavior will be documented and maintained in confidentiality.
- Parent/guardian will be notified verbally.
- Parent/guardian will be given written copies of the disruptive behaviors that might lead to expulsion.
- The director, classroom staff and parent/guardian will have a conference(s) to discuss how to promote positive behaviors.
- The parent will be given literature or other resources regarding methods of improving behavior. This may include a recommendation or an evaluation by professional consultation on premises, or a recommendation for an evaluation by a local school district child study team.

(This expulsion policy is also written in your Parent Handbook for your reference)

I have read and understand the expulsion policy for the Early Childhood Program at Temple Beth Ahm Yisrael

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Name of Child

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Parent's Name

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Parent's Signature

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Date



Early Childhood Program  
At Temple Beth Ahm Yisrael



60 TEMPLE DRIVE  
SPRINGFIELD, NJ 07081  
973-376-0539x22  
973-376-5478 – FAX  
Sandi Newman, Director  
sandinewman@tbaynj.org

Dear Parent:

In keeping with New Jersey's child care center licensing requirements, we are obliged to provide you, as the parent of a child enrolled at our center, with this informational statement.

The statement highlights, among other things: your right to visit and observe our center at any time without having to secure prior permission; the center's obligation to be licensed and to comply with licensing standard; and the obligation of all citizens to report suspected child abuse/neglect/exploitation to the State Central Registry Hotline (877)NJ ABUSE/(877) 652-2873.

Please read this statement carefully and, if you have any questions, feel free to contact me at 973-376-0539 x22.

Sincerely,

Sandi Newman, Director

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Please complete and return this portion to the ECP office. (Please print)

Name of Child: \_\_\_\_\_

Name of Parent(s): \_\_\_\_\_

I have read and received a copy of the Information to Parents statement prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families.

Signature: \_\_\_\_\_

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

## **DEPARTMENT OF CHILDREN & FAMILIES OFFICE OF LICENSING INFORMATION TO PARENTS**

Under provisions of the Manual of Requirements for Child Care Centers (N.J.A.C. 10:122), every licensed child care center in New Jersey must provide to parents of enrolled children written information on parent visitation rights, state licensing requirements, child abuse/neglect reporting requirements and other child care matters. The center must comply with this requirement by reproducing and distributing to parents this written statement, prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families (DCF). In keeping with this requirement, the center must secure every parent's signature attesting to his/her receipt of the information. Our center is required by the State Child Care Licensing law to be licensed by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families (DCF). A copy of our current license must be posted in a prominent location at our center. Look for it when you're in the center.

To be licensed, our center must comply with the Manual of Requirements for Child Care Centers (the official licensing regulations). The regulations cover such areas as: physical environment/life-safety; staff qualifications, supervision, and staff/child ratios; program activities and equipment; health, food and nutrition; rest and sleep requirements; parent/community participation; administrative and record keeping requirements; and others.

Our center must have on the premises a copy of the Manual of Requirements for Child Care Centers and make it available to interested parents for review. If you would like to review our copy, just ask any staff member. Parents may secure a copy of the Manual of Requirements by sending a check or money order for \$5 made payable to the "Treasurer, State of New Jersey", and mailing it to: State of New Jersey, Department of Children and Families, Licensing Publication Fees, PO Box 34399, Newark, New Jersey 07189-4399.

We encourage parents to discuss with us any questions or concerns about the policies and program of the center or the meaning, application or alleged violations of the Manual of Requirements for Child Care Centers. We will be happy to arrange a convenient opportunity for you to review and discuss these matters with us. If you suspect our center may be in violation of licensing requirements, you are entitled to report them to the Office of Licensing toll free at 1 (877) 667-9845. Of course, we would appreciate your bringing these concerns to our attention too.

Our center must have a policy concerning the release of children to parents or people authorized by parents to be responsible for the child. Please discuss with us your plans for your child's departure from the center.

Our center must have a policy about administering medicine and health care procedures and the management of communicable diseases. Please talk to us about these policies so we can work together to keep our children healthy.

Our center must have a policy concerning the expulsion of children from enrollment at the center. Please review this policy so we can work together to keep your child in our center.

Parents are entitled to review the center's copy of the Office of Licensing's Inspection/Violation Reports on the center, which are issued after every State Licensing inspection of our center. If there is a licensing complaint investigation, you are also entitled to review the Office's Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center during the current licensing period. Let us know if you wish to review them as we will make them available for your review.

Our center must cooperate with all DCF inspections/investigations. DCF staff may interview both staff members and children.

Our center must post its written statement of philosophy on child discipline in a prominent location and make a copy of it available to parents upon request. We encourage you to review it and to discuss with us any questions you may have about it.

Our center must post a listing or diagram of those rooms and areas approved by the Office for the children's use. Please talk to us if you have any questions about the center's space.

Our center must offer parents of enrolled children ample opportunity to assist the center in complying with licensing requirements; and to participate in and observe the activities of the center. Parents wishing to participate in the activities or operations of the center should discuss their interest with the center director, who can advise them of what opportunities are available.

Parents of enrolled children may visit our center at any time without having to secure prior approval from the director or any staff member. Please feel free to do so when you can. We welcome visits from our parents.

Our center must inform parents in advance of every field trip, outing, or special event away from the center, and must obtain prior written consent from parents before taking a child on each such trip.

Our center is required to comply with the New Jersey Law Against Discrimination (LAD), P.L. 1945, c. 169 (N.J.S.A. 10:5-1 et seq.), and the Americans with Disabilities Act (ADA), P.L. 101-336 (42 U.S.C. 12101 et seq.). Anyone who believes the center is not in compliance with these laws may contact the Division on Civil Rights in the New Jersey Department of Law and Public Safety for information about filing an LAD claim at (609) 292-4605 (TTY users may dial 711 to reach the New Jersey Relay Operator and ask for (609) 292-7701), or may contact the United States Department of Justice for information about filing an ADA claim at (800) 514-0301 (voice) or (800) 514-0383 (TTY).

Anyone who has reasonable cause to believe that an enrolled child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect, or exploitation by any adult, whether working at the center or not, is required by State law to report the concern immediately to the State Child Abuse Hotline, toll free at 1 (877) NJ ABUSE. Such reports may be made anonymously.

Parents may secure information about child abuse and neglect by contacting:

Community Education Office, Division of Youth and Family Services, PO Box 717, Trenton, New Jersey 08625-0717.