

Providence Baptist Church Mother's Day Out Policy Statement

Children ages 6 weeks to school age may attend the Mother's Day Out program of Providence Baptist Church. Mother's Day Out meets on Tuesday and Thursday or Monday and Wednesday each week from 9:30 AM until 2:00 PM. We ask that parents be prompt in picking up their child up at 2:00 PM. We ask that you notify us if you child is going to be absent. During, June and July, Mother's Day Out has a Summer Safari, that welcomes children up to age 12.

Parents are expected to bring their child(ren) to their assigned room(s), sign them in on the appropriate form(s) and bring the following items for each child:

1. Sack lunch, including drink
2. Change of clothing
3. 3-4 extra diapers or pull-ups
4. Baby Wipes

Please label ALL personal belongings with your child's name. We ask that you NOT bring toys from home to MDO. Please dress your child in tennis shoes and socks.

The Mother's Day Out program is a yearlong program. In the event of inclement weather, we usually follow the closure, of the Hamilton County School system. We will keep you up to date on Facebook, we will post by 7 am.

FEES: Activity Fee: \$30.00 (due upon enrollment, June, January and August) covers classroom supplies

Registration Fee: (to be paid at time registration form turned in):

\$15 (1 child); \$25 (2 children); or \$35 (3+ children)

Monthly Fee: (due the first day of each month that your child attends):

For 2 days a week: \$150 (1 child); \$280 (2 children); \$420 (3 children)

For 1 day a week: \$75 (1 child); \$140 (2 children); \$205 (3 Children)

Drop-in rate: \$25 per day (1 child); \$20 Per day (each additional child) – Call to ensure availability

Extended time fee: For late pick-ups or early drop-offs, the fee is \$15. (\$5.00 daily fee for unscheduled delays.)

In order to enroll your child in the sessions, fees must be paid in full. All payments are due the first day of the month that your child attends. **There will be no credit given for personal days missed, only for inclement weather closures will a credit be issued.** If a day is missed, you can make up the day in the same week if there is availability. No refund will be issued for the month paid in advance if the guardians should decide to no longer participate in MDO.

Illness Policy:

A child must be **free of the following symptoms for at least 24 hours** before he or she can return to the MDO program:

- Fever
- Diarrhea
- Vomiting
- Lice
- Cold or Flu

(This includes: Unexplained rashes, blisters, bumps, or swelling and Any other symptoms that would qualify as illness.)

In order to keep the spread of infections down, as well as for your own child's best interest, if your child begins to exhibit any of the above symptoms while under the care of our MDO program, you will be expected to return and pick him or her up as quickly as possible. We will welcome them back when they have been **symptom free for 24 hours**. If your child has been found with lice, we ask that you bring the empty bottle of shampoo used to treat your child and no nits in the hair before your child can return.

Discipline Policy:

We will always redirect first if further action is needed the following step may be taken. Your child will be given time out (a maximum of one minute per age of child) as discipline. If a teacher feels your child's behavior warrants further action, the child will be taken to the director for a short time out away from the class.

Potty Training:

Your child must be potty trained prior to promotion to the three-year-old class.

I have read and agree to comply with the policy statement for Providence Baptist Church Mother's Day Out.

It is my understanding that Providence Baptist Church is not responsible for any injuries from accidents occurring during my child's stay at Mother's Day Out. I have received and understand the Providence Baptist Church Handbook as well as the Accident Waiver and Release of Liability. Mother's Day Out is not a state licensed program. I do hereby authorize emergency medical care in case of accident or medical emergency.

Please list, if any, special needs or considerations needed for your child, i.e... Severe allergies, tendency to bite, Autism, etc. to ensure smooth transition:

Signature of Parent/Guardian: _____

Date: _____