



Daycare Re-Enrollment Packet Checklist

(Return completed, with all documents. Partial packets will not be accepted)

Student Name(s): _____

Page #	Items Needed to Complete Re-Enrollment: <i>(Incomplete Packets Will Not Be Accepted)</i>	Office Use Only
2-3	Re-enrollment paperwork <i>(Return Completed)</i>	
4	Sunscreen Policy <i>(Return Completed)</i>	
5	Publishing Consent <i>(Return Completed)</i>	
6	Emergency Contact Information/Pick-up Information Form <i>(Return Completed)</i>	
7	Daycare Tuition Sheet <i>(for your information)</i>	
8-10	Financial Policy <i>(Return Signed and dated)</i>	
11	FACTS Family Portal Instruction Sheet <i>(Read and keep this document)</i>	
12-19	Healthcare Policy and Medical Forms <i>(Return completed medical forms)</i>	
-	Registered on FACTS for current year (2026-2027), confirmed by finance department **You are responsible to access and update your FACTS family portal to match the signature(s) on the Financial Policy**	
-	<p><i>Re-Enrollment Form and Fee(s) Enclosed:</i></p> <p>\$75.00 Re-Enrollment fee for returning students paying before 8/1/2026. \$150.00 Re-Enrollment fee for returning students paying after 8/1/2026. Upon acceptance the NON-REFUNDABLE Enrollment Fee of \$150.00 MUST BE PAID No fees are applied or transferable towards tuition.</p>	

**** In order to enroll my student and secure a position in class, I have enclosed ALL of the documents listed above, as well as all enrollments fee(s). I also understand that I have not completed my child's enrollment until a payment plan has been selected on the FACTS portal. ****

*****I have read the Daycare Parent Handbook on the DCA Website: www.dayspring-academy.org and agree to abide by it. *****

Father's Signature

Mother's Signature

Date

Date

Approval Date 3/27/26



DAYSPRING CHRISTIAN ACADEMY

Daycare Re-Enrollment

Full-Time **Part-Time** **M**__ **T**__ **W**__ **Th.**__ **F**__

Time Slot: **8.5hours** 7am-3:30pm__ 7:30am-4:00pm__ 8:00am-4:30pm__ 8:30am-5:00 pm__ 9:00am-5:30pm__

Time slot: **10.5 hours** 7am-5:30pm__ 7:30am-6:00pm__

School calendar: 41 weeks__ (same as DCA 6/11/2027 unless specified) **Specific Date** _____ or **52 Weeks**__

Child's Name: _____ Date of Birth: _____

Child's Address: _____

Primary Language spoken at home: _____ Place of Birth: _____

Child's Physician / Clinic: _____ Telephone: () _____

PARENT'S INFORMATION

Father _____	Mother _____
Home Address _____	Home Address _____
Phone number () _____	Phone number () _____
Dad's Email _____	Mom's Email _____
WORK INFORMATION * must fill out	WORK INFORMATION * must fill out
Place of Employment _____	Place of Employment _____
Address _____	Address _____
Tel. No. () _____	Tel. No. () _____

CHILD IDENTIFYING INFORMATION

Eye color _____ Hair Color _____ Sex _____

Height _____ Weight _____ Race _____

Identifying Marks: _____

For center use:

Date: _____

Classroom moving to: _____

**Returning children rate
(non-refundable fee):**

**Discounted re-enrollment fee is \$75.00
each school year by August 1st.
\$150.00 if paid after August 1st.**

DEVELOPMENTAL HISTORY AND BACKGROUND INFORMATION

Child's Name _____ Date of Birth _____

DEVELOPMENTAL HISTORY

Type of birth _____ any complications? _____

Age began sitting _____ crawling _____ walking _____ talking _____

Are there any speech difficulties? _____

Special words to describe needs _____

HEALTH

Serious illnesses and/or hospitalizations _____

Special physical conditions, disabilities, or allergies _____

Regular medications _____

EATING HABITS

Special characteristics or difficulties _____

Favorite's foods _____ Food refused _____

Child eats with: Hands _____ Spoon _____ Fork _____ Other _____

TOILET HABITS

How does child indicate bathroom needs (include special words) _____

Is your child ever reluctant to use the bathroom? _____

Does your child have accidents? _____

SLEEPING HABITS

Does your child become tired or nap during the day (include when and how long)? _____

When does your child go to bed at night? _____

When does your child get up in the morning? _____

Describe any special characteristic or needs (stuffed animal, story, mood on waking, etc.): _____

SOCIAL RELATIONSHIPS

How would you describe your child _____

Previous experience with other children _____

Reaction to strangers _____

Able to play alone YES _____ NO _____

Fears (the dark, animals, etc.) _____

How do you comfort your child _____

How do you discipline your child _____

SUNSCREEN PERMISSION FORM

Name of child: _____ Date: _____

Name of sunscreen and the SPF Number: _____

I / we understand that:

- It is my/our responsibility to provide a non-expired waterproof sunscreen with a minimum SPF of 30, labeled with the child's name.
- DAYCARE AT DAYSPRING asks that children arrive at school with their application already applied to allow more time for morning activities.
- My child's care provider will assist by applying sunscreen to bare surfaces including the face, tops of ears and bare shoulder, arms, legs, and feet before outdoor activities.
- Sunscreen will not be applied to any broken skin or if a skin reaction has been observed. Any skin reaction observed by staff will be reported to the parent/guardian.

Special instructions:

- If my child's sunscreen is not readily available, my child may use it. The sunscreen provided by the school is usually Coppertone water babies SPF, or Banana Kids/Children SPF 50.
- I do not want my child to use any other sunscreen other than the one he or she brings to school.

Parent / guardian signature: _____ Date: _____

Publishing Consent Form

I (DCA Daycare parent) understand that enrollment of my child at the Daycare at Dayspring Christian Academy includes permission to publish images of my child in the school's annual yearbook.

Dayspring Christian Academy includes photos of "student life" such as birthday, chapel programs, field trips, academic and athletic competitions, service projects, as well as displays exemplary student work like art, poetry, student interviews, etc. on the DCA website, on FACTS SIS, in the DCA newsletter, and other school promotional brochures or materials, and occasionally in local media print and electronic publications. DCA WILL ALWAYS TAKE GREAT CARE TO PROTECT STUDENTS AND WILL ONLY USE IMAGES IN A REASONABLE AND SAFE MANNER.

*****Parents who do not wish to have their student's image used must understand that their student will NOT be able to be in photos or videos taken at any DCA events; including field trips, athletic events, school camps and retreats, field day, chapel programs, and will not be included in photos used for any school purpose or publications.*****

Parents who do not wish to have their child's name, picture, written work, voice, verbal statements, portraits (video and still) appear in the school publications, local publications, Christian media publications, including electronic publications, must NOTIFY THE SCHOOL ADMINISTRATOR IN WRITING PRIOR TO THE FIRST DAY OF THE SCHOOL YEAR, as well as completing this form. Should I decide to revoke that consent, it will be my responsibility to contact the office in writing.

I give permission to Dayspring Christian Academy to use images and works of my child/children for promotional material. I understand that DCA owns all rights to all images. No monetary compensation will be given to any student or family for the use of images or works of their student. I release all claims against DCA with respect to copyright ownership and publication including any claim for compensation related to use of material.

Printed Name of Parent/Guardian

Printed Name of Parent/Guardian

Signature of Parent Guardian

Signature of Parent Guardian

Date _____

Date _____

If you refuse, please sign above and then check this box:

If refused, are they allowed to be pictured in the yearbook?: Y N

Emergency Contact (EC) and Student Pick-Up (PU) Form

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Please list the driver(s) that your child/children may ride to and/or from school with. Should you wish your child/children to ride with someone not on the designated list, you must inform the school office prior to the child/children being picked up. If the school office is not informed, the student will not be permitted to leave with the non-designated driver.

Please check () if Emergency Contact (EC), Pick-up (PU) or both

EC	PU	First name	Last name	Relation	Cell Phone	Work Phone

If applicable, please list any drivers who are never permitted to pick up your child/children.



DAYSRING CHRISTIAN ACADEMY

DAYCARE TUITION RATES

New student rates. Current students rate remain the same until 8/2026.

APPLICATION FEE- A \$45.00 (non-refundable) application fee is required for all new student applicants. This fee applies to all new students, even if the family has other students currently enrolled at DCA. The SHADOW DAY- is part of the application process at no additional cost.

ENROLLMENT FEE- A \$150.00 (non-refundable) enrollment fee will be due for all new students; and for returning students paying after August 1st. A discounted enrollment fee of \$75 (non-refundable), for returning students only, is offered if paid between June 1st and August 1st. Enrollment fee is required along with the enrollment packet at the time of enrollment. Before the enrollment process can be completed, all prior year financial obligations must be paid in full by August 20th.

Tuition FACTS Sign-up <https://online.factsmgt.com/grant-aid/inst/3FR9R/landing-page>

<u>Classroom</u>	<u>Hours</u>	<u>Amount</u>
Infant	10.5 Hours (M-F)	\$370 weekly
Infant	8.5 Hours (M-F)	\$330 weekly
Infant	10.5 Hours (1-4 days)	\$85 Daily
Infant	8.5 Hours (1-4 days)	\$75 Daily
TOD/TTR	10.5 Hours (M-F)	\$340 weekly
TOD/TTR	8.5 Hours (M-F)	\$310 weekly
TOD/TTR	10.5 Hours (1-4 days)	\$80 Daily
TOD/TTR	8.5 Hours (1-4 days)	\$70 Daily
PTR	10.5 Hours (M-F)	\$315 weekly
PTR	8.5 Hours (M-F)	\$290 weekly
PTR	10.5 Hours (1-4 days)	\$75 Daily
PTR	8.5 Hours (1-4 days)	\$65 Daily

TUITION PAYMENT OPTION

• **FULL PAYMENT PLAN:** A discount of 3% will be granted for full payments made on or before August 20th for all Daycare classrooms. **There will be no exception to the pre-payment due date.** Payment is to be made directly to DCA. (See Payment Methods below)

• **TWO PAYMENT PLAN:** Half of the total tuition is due by August 20th. The remaining half is due February 20th. Failure to make the payment on time will result in a monthly payment plan via FACTS. The prepayment discount for this option is 1.5%; the discount is applied in half increments after the payments are made.

• **BUDGET PLAN:** A twelve-month automatic withdrawal payment plan is available, and you are required to go through FACTS Tuition Management Company. Payments run from **August through July, due every 20th day** of the month. There **will be no exception to the schedule.**

• **PAYMENT METHODS:** Cash, Check, Credit Cards, and online Bank Account. If using a Credit/Debit Card, a 3.05% processing fee will be applied. Payments can be made directly at the DCA office, or online at www.Dayspring-Academy.org with a Credit/Debit Card or Bank Account.

****ALL TUITION PAYMENTS (no matter which plan you are using):** **Your first tuition payment is due by the 20th of the month before starting or on the first day of class, whichever comes first. All subsequent payments are billed one month in advance (ex. you will be billed for June in May). Note- some months may have 5 weeks and you will be billed accordingly.**

FEES – Early drop-off fees: Should your child need to be dropped off before their selected time slot, a 24-hour notice is required and a \$10.00 fee for every 15 minutes (or portion of) thereafter.

A **Late fee** is assessed for every child picked up after their chosen slotted time hour. \$10.00 per every 15 minutes or any portion thereafter. All fees are charged through FACTS as they are generated.

You must pick up your children prior to closing; The daycare closes at 6pm.

IMPORTANT! PLEASE READ THROUGH AND ONLY SIGN ONCE YOU HAVE READ AND UNDERSTOOD THIS POLICY.



STATEMENT OF FINANCIAL POLICY- Daycare

Family Name (please print): _____

Tuition

DCA Daycare tuition is collected through FACTS Tuition Management Company. All enrolled families are required to create a FACTS account through their family portal. Tuition and all other fees and school expenses will be collected through FACTS every 20th of the month; starting **August 20th through July 20th**, ahead of the new school year start day, with no exceptions. Please do not send tuition payments to school with your child.

Daycare at Dayspring Christian Academy makes financial, and employment decisions based on anticipated enrollment. Tuition will not be reduced for snow days, absences, illness, holidays, school in service, professional days, or emergency school closings. A 30-day written notification is required to inform any changes of schedule, attendance or withdrawal that will directly impact tuition costs.

When a family withdraws any time after completing enrollment it causes a hardship on the school; therefore, non-exemption withdrawals will result in the payment of 30 days' tuition after the student's enrollment is completed. Once a non-exemption withdrawal has occurred, it will result in the payment of 30 days thereafter. No siblings or re-enrollments will be completed until the remaining balance has been paid in full. Administration will not be able to grant any exceptions to this policy.

DCA daycare reserves the right to make tuition changes. In rare circumstances, should there be any tuition and/or fees rate change, DCA reserves the right to change them at any point. Tuition rates reflect the cost and needs of the daycare, should there be any change in tuition rates, you will be notified by the school in writing with ample notice.

Tuition Payment Options

DCA offers three tuition payment options. *The pre-pay (pay in full) option*- Pre-payments must be made by August 20th, in order to receive the 3 % discount, no exceptions or extensions will be made. *The ½ and ½ payment option* - The first half of the full tuition is due by August 20th, at which point half of the total discount will be credited. The second half of the total tuition is due by February 1st, at which point the remaining half of the discount will be credited. If the second payment is not made by the 1st, the remaining total amount due will be divided evenly over the remaining 6 months through the automated monthly payment plan through FACTS (Due every 20th thereafter).

The monthly budget plan- is a twelve-month payment plan, in which each month you pay the total tuition cost per that month's many weeks period (closing weekday is Friday), with the first payment due by August 20th. Please note that not every month is a 4-week month, and the months also vary per year. Therefore, some of your payments will include 5 weeks based on the number of Fridays there are in a month.

All tuition payments, no matter which plan you are using, your first tuition payment is due by the 20th of the month before starting or on the first day of class, whichever comes first. All subsequent payments are billed one month in advance (ex. you will be billed for June in May).

Tuition Assistance

There is a 3% discount if paying for the year in full, or a 1.5% discount if paying half by August 20th and the other half by February 1st (please see the payment options above for complete details).

Fees

All fees (application, enrollment, lunches, etc.) are non-refundable and non-transferable. No exceptions will be made.

Early drop Off fees: **If dropped off before scheduled time slot.** 24 hour notice and then \$10.00 for every 15 minutes.

Late Fees- **Late fees that are assessed during hours of operation (7am – 6pm), outside of the normal schedule for that student.** Late Fees are based on the fee for adding hours to one's normal schedule at the rate of \$10 per every 15 minutes (**any portion**). A late fee will be assessed to the family's FACTS account per student. FEES WILL BE ADDED TO YOUR FACTS ACCOUNT WEEKLY and DUE ON THE 20TH OF THE MONTH, you will have at least two weeks to review the charges. We may ask that a family change their schedule if they are having difficulty consistently picking up at their regularly scheduled time. **For children whose pickup time is 6pm, please allow enough time at the end of the day to arrive at Daycare, pick up your child/children, and to leave by 6:00pm.**

Hot Lunches: (we are actively working on this- we will keep you informed of all developments) Hot lunches, when offered, are during the DCA PK-12 school calendar year, see DCA school calendar for details, the cafeteria is otherwise closed. Hot lunches must be ordered a week ahead via the FACTS Family Portal and cost \$5/lunch if purchased in advance. Payments are processed through FACTS. We do not make changes or give credit if a child is absent on the day he/she has ordered lunch; that lunch is forfeited including in the case of a school cancellation for any reason. Lunch cannot be saved or sent home.

Delinquency

If circumstances occur that force you to delay payment, please call the school office one week in advance of the due date so that arrangements can be made. When a family account is 30 days overdue, a \$50 fee will be assessed per student. Contact with the school must be made at that point.

When a family account has reached 60 days in delinquency, and no arrangement for payment has been made and adhered to, the student(s) continued enrollment will be in jeopardy. (Please see next page or parent handbook for details) Accounts will be sent to collections.

Early Withdrawal

All student withdrawals must be processed through the school office as follows:

- 30 days written notice of student withdrawal
- Payment of all tuition and other financial debts
- Payments will be prorated to 30 days after written notification is provided and approved by the daycare director.
- Exemption is made for a company/military transfer, and family health related. Documentation is required.

Fundraising Dayspring Christian Academy (DCA) endeavors to keep tuition rates affordable for the benefit of each parent. For this reason, DCA operates several fund-raising programs and anticipates parents' participation at your choice. DCA is a non-profit organization and maintains tax-exempt status.

Every family is expected to pay tuition on time. Meeting financial responsibilities on time is part of Christian stewardship. The school's expenses are incurred on an annual basis, with the hiring of teachers and staff predetermined, **based upon your enrollment and agreement to fulfill your financial obligation.**

- Tuition balances must be **paid in full on a monthly basis by the 20th**, that includes all tuition, and all non-FACTS paid fees (i.e. lunch fees, & late fees, etc.).
- After a student's enrollment is completed, should a student withdraw for any reason (other than administrative withdrawal, proper 30 days in advance written notification withdrawal, or for a reason stated in the Early Withdrawal section (previous page) and Parent-Student Handbook), it will result in the payment of the 30 days thereafter.
- Our policy states that no new siblings or re-Enrollments will be completed until the remaining balance has been paid in full. Administration will not be able to grant any exceptions to this policy.
- After 30 days of delinquency, a \$50 per student late fee is assessed on your account.
- Our Tuition and Fee Schedule Agreement states: If an account is past due beyond 45 days, a student will not be allowed to attend the daycare until the account is current; and your account will be turned over to collections.
- If you have unpaid fees or tuition at the time of leaving, you will receive a statement for final payment to be submitted and received by the last day in attendance.

In signing and submitting this enrollment form, I agree to pay in full all tuition and fees. I further acknowledge that I agree to reimburse Dayspring Christian Academy Daycare all incurred fees, all costs and expenses; including any assessments by any collection agency used, as well as all attorney's fees DCA may incur in its collection efforts. I have read and understand the provisions set forth in the *Dayspring Christian Academy Daycare Statement of Financial Policy*. I understand that my obligation to make tuition payments in full, when due, is unconditional. I understand that if my account becomes 60 days delinquent, my child/children will not be allowed to attend the daycare until the account is paid up to date. I agree to abide by the terms and conditions stated in these documents and fulfill my responsibility as stated in both.

Financially Responsible Party (Print name/Relationship)

Financially Responsible Party (Print name/Relationship)

Signature/Date

Signature/Date



***YOU MUST CHECK THE PAYMENT PLAN YOU ARE SELECTING
ON FACTS WHEN SETTING UP YOUR PAYMENT PLAN:***

Full Payment Plan: **Two Payment Plan:** **Budget Plan:**



FACTS Family Portal

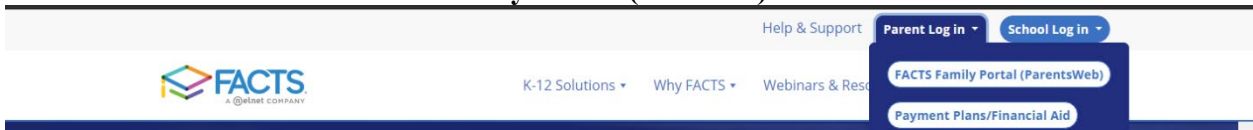
Check grades and connect with your school with FACTS Family Portal (formerly RenWeb)

FACTS provides the technology and communication so that you can connect with your student and school easily and on your schedule. Check grades and stay in the know on everything going on at your school with FACTS Family Portal.

Go To: **factsmgmt.com**

First: Click **Parent Log in**

Next: Click **FACTS Family Portal (RenWeb)**



First time users will need to create a new account.

Please note: You must use the same email address that you provided to the school. FACTS will send you an email with a link (good for 6 hours) to set up your own username and password.

Return to this Login screen each time to access your student's information.

District Code:
DA-MA

User Name:

Password (case-sensitive):

[Forgot User Name/Password?](#)

Parent Student Staff

District Code: **DA-MA**

Username: The one you created or your student's account (given to them at school)

Password (case sensitive): The one you created or your student's account (given to them at school)

IMPORTANT: Make sure you select **Parent** OR **Student** before clicking Login. (Each account is different.)

You have five invalid attempts before you are locked out and the school will need to reset your account.

Should you need help setting up your account, feel free to contact FACTS customer service : 866-441-4637



Daycare at Dayspring Health Care Policy

Individual Health Care Policy

Any child who has a chronic health condition or allergy must have an individual health care plan authorized by their medical practitioner. It must include a description of the chronic condition, a description of the symptoms of the condition, an outline of any medical treatment that may be necessary while the child is in care, and the potential side effects of the treatment with an outline of the potential consequences to the child's health if the treatment is not administered. The director can supply you with a form for your physician to fill out.

Accidents and Injuries

In the event of a medical emergency, care will be sought immediately for the child. The director, staff member, or school nurse will stay with and care for the injured/sick child as they are transported to a medical facility. The child's medical records and permission form will accompany the child to the nearest facility. A second staff member will be responsible for contacting an ambulance and the child's parents immediately. Staff will continue attempts to notify parents until contact is made. If parents cannot be reached alternative contacts will be notified.

In the event of non-emergency injuries or illness requiring medical attention, the Director or staff member will notify parents or the emergency contact person. The responsible adult will be asked to transport the child for treatment. The Director or staff member will care for the child until the parent's arrival. If a responsible adult cannot be reached and treatment is required, the child will be transported by ambulance to the nearest medical facility.

Minor injuries not requiring medical intervention will be treated at the school by a staff member. An accident report will be completed for parental review and the incident noted in the accident log. A copy of the accident report will be sent home detailing what happened and the resulting treatment that was administered.

Preferred Facilities

The closest medical facility will be used during field trips; otherwise, medical attention will be sought at the Hasbro Children's Hospital or Sturdy Memorial Hospital.

Hasbro Children's Hospital
593 Eddy Street
Providence, RI
401-444-4000

Sturdy Memorial Hospital
211 Park Street
Attleboro, MA
508-222-5200

Required Records

Current medical and immunization records are required prior to enrollment. Records should include a complete physical examination, lead screening, HIB immunization, chicken pox vaccination, tuberculin test and any others required by the Commonwealth of Massachusetts at enrollment time.

These records must be updated each physical and an official copy be supplied to the school. Any time a child has an updated medical record, such as a physical parents should submit a copy to the school nurse or director.

The school will keep a confidential health report on file for each child that includes:

- contact information for parents/guardians
- contact information for two alternate adults to be contacted in the event of an emergency
- a complete immunization record
- a list of any allergies
- an Authorized Adult form specifying which adults may pick up the child from school
- a signed permission slip for emergency treatment in the event a parent or guardian cannot be reached.
- teacher observations
- early intervention referral records
- medication authorization slips

Contact Information

It is imperative that the school is notified of any changes to emergency contact information for parents, guardians and alternate emergency contacts. Notification should be made in writing.

Illness

To curtail the spread of illness and hasten recovery, it is imperative that sick children remain at home. A child showing the following symptoms should be kept home for rest:

- excessive lethargy
- fevers of 100 or higher
- severe cold symptoms or nose drainage
- sore throat or swollen glands
- undiagnosed rash or skin eruption
- vomiting
- diarrhea
- untreated head lice
- inflammation or oozing from the eyes

Parents will be asked to pick up their child early should any of the above symptoms appear during school hours. To minimize our student's exposure to possible illness, un-well children will be supervised in an isolation area until a parent arrives. Parents are expected to have an alternative child care arrangement in place when children are ill. Parents are also expected to promptly (within one hour) pick up their children from the Daycare when any of the conditions above exist.

When a child becomes ill during the school day, we make every effort to reach parents. If after 30 minutes we have not been able to make contact with a parent, we will call the emergency contact listed in the child's file.

Should your child require antibiotics, we ask that they not return to school for twenty-four hours after treatment begins. A note from the child's pediatrician stating the date upon which the child is no longer at risk for spreading communicable illness is required.

If your child has a fever over 100, a phone call will be made indicating that you need to come pick your child up. We ask that before your child return to school, they must be fever-free for twenty four hours.

Please inform the school by 9:00 am if your child will be out sick. The school must be notified if your child has contracted any contagious diseases so that we may take the necessary steps to curtail an outbreak of the illness. In the even that children are exposed to a contagious disease, a notice will be sent home indicating symptoms of such illness.

Our goal is to provide childcare for well children. Having ill children at the Daycare presents the very real possibility that others can be infected. While we understand that parents need to be at work or in class, we need to enforce this policy to protect all children and staff from unnecessary exposure to **communicable** disease. Parents who repeatedly fail to follow policies related to keeping children at home when they are ill may be required to withdraw their child from the Daycare.

Infection Control and Personal Hygiene

Children are encouraged to develop desirable habits of personal hygiene, including washing hands after toileting, diapering, and before and after meals. Eating a variety of nutritious foods is also encouraged. In addition to instructing children in these habits, teachers model the behaviors.

Infectious Diseases

When a communicable disease has been introduced into the Daycare, parents will be notified. The Daycare also will report these occurrences to the state and local health departments when required. Parents are urged to notify the Daycare when their child is known to have been exposed to a communicable disease outside the Daycare.

The director may determine that a child who does not appear to be fully recovered from an illness cannot be readmitted to the Daycare without a statement from a physician stating that the child is able to return and participate in the activities of the Daycare, or is no longer infectious.

We reserve the right to refuse care due to illness.

In the case of impetigo, lice, ringworm, pinworms, rashes, chicken pox, thrush, etc. your child must be **NON-CONTAGIOUS** before returning to Daycare.

When a Child Needs to Stay at Home

- A child's temperature should be normal without medication for 24-hours before the child is brought to the Daycare. If your child has a fever in the evening, he/she should not be brought to the Daycare in the morning, even if his/her temperature is normal. Fever is defined as 100° F or higher.
- If your child vomits during the night, he/she should not be brought into the Daycare the next day, unless it is certain that the vomiting was not due to an infectious condition.
- Diarrhea, as defined by the CDC, consists of more than one abnormally loose stool. A child should not return to the Daycare until his/her bowel movements have returned to a normal consistency.
- Conjunctivitis (Pinkeye): a child with pinkeye must be on medication before returning to the Daycare.
- Rash: body rash, not associated with diapering, heat or allergic reactions, especially with fever or itching.
- Sore throat coupled with a fever or swollen neck glands.
- Lice, Scabies: Children must not return to daycare until they are free of lice and nits (eggs). Children with scabies can be admitted after treatment.
- If your child is unusually tired, pale, shows a lack of appetite, is difficult to wake, confused, or irritable. This is sufficient reason to exclude a child from daycare.

Should your child come to school with any of the above symptoms, you will be contacted, upon pick up you will be asked to sign a 24 hour exclusionary notice indicating that your child cannot return to school the next day.

Returning after illness

It is imperative that children feel well enough to return to school. **Even if they are no longer contagious, please do not send your child to the school if additional rest and recuperation time at home is to their benefit.**

Children may return to the school **with** a physician's release if they are feeling well and meet the following criteria:

- complete clearing of contagious rashes or parasitic diseases
- passing of an illness' contagious stage (confer with your doctor for unlisted conditions) :
 - chicken pox – after spots have crusted
 - measles – five days after rash begins
 - German measles – after rash disappears
 - mumps – nine days
 - lice and scabies – after treatment completion

Children may return without a physician's release if they feel well enough and meet the following criteria (confer with your doctor for unlisted conditions):

- fever – no fever for 24-hours during which no fever-reducing medication is administered
- diarrhea –24- hours or more- when solid stools have returned
- vomiting –24 hours or more-when vomiting stops completely and child is able to digest food
- pink eye/conjunctivitis – 24 hours after treatment is first administered
- strep and other bacterial illnesses – when child is no longer contagious
- Cocksakie virus and other viral illnesses – when child is no longer contagious
- cuts & sores – bandages must cover all open cuts or sores until they have scabbed over.

Medication Administration

Parents must supply written authorization permitting school staff to administer medication to their child. ALL medication including Tylenol must be accompanied by a doctor's prescription before it can be administered. A record of medication administration is made in the child's file specifying the time and date of medication as well as the name and signature of the administering staff member.

Remaining medication will be returned to parents at the day's end. A second prescription may be advisable for prolonged treatments to avoid the risk of medication mistakenly left behind at the school. Medication that is expired or prescriptions that are expired will not be administered to children. A new prescription must be ordered with the current date and given to the school.

Should your child need emergency medication in order to prevent a high fever, or febrile seizures a decision will be made by the director or nurse to administer Tylenol. A consent form must be signed in order for Tylenol to be administered. In all other non-emergency events,

Tylenol will not be given unless a current doctor's note is on file.

The staff will administer only dated, labeled, prescribed medication in its original, child-proof bottle. It must be handed directly to a teacher, not placed in your child's bag. Prescription containers must include the child's name, fill and expiration date, contents and dosage, directions for administration, physician's name and pharmacy name.

Non-prescription medication will be administered when accompanied by an authorization note from the child's parent, guardian **and physician**. The note must state the child's name, name of non-prescription drug, strength, dosage and duration of use as well as directions for administration.

CPR/First Aid

All staff members are certified in first aid and CPR and instructed on usage of supplies maintained at the school. First aid supplies are stored out of the children's reach and checked monthly to ensure adequate inventories. Our first aid inventory is based upon a list supplied by a medical consultant.

For Parent Information Only - DO NOT RETURN

REQUIRED MEDICAL RECORD INFORMATION FOR DAYCARE – GRADE 12 STUDENTS The following medical records are **due by August 1** to assure entry to school in the fall. **Your child will not be permitted to begin the school year until ALL medical records are up to date.**

Please be advised that we follow the rules for vaccine requirements in Massachusetts even if you live in RI. The public health nurse in Attleboro is available to administer required vaccines free of charge, if it is unavailable from your doctor. If you are in need of these services, call: (508)223-2222.

If your child is new to Dayspring, at any grade level, a copy of the following must be submitted:

- A current physical exam: Remember to submit whenever you have a new exam.
- Up-to-date immunization records
- An official copy of a birth certificate
 - A current record of a lead test date for Daycare (1 y/o), Preschool, and Kindergarten students

If your child is participating in a Dayspring Contact Sports Program, you must submit the following:

- Assumption of Risk Form
- Sports Candidate Form
- Physical Exam (with a statement from his/her physician that your child may participate in contact sports)
- A Massachusetts Pre-participation Head Injury/Concussion Reporting Form

If your child is entering 7-grade, you must submit the following:

- 2 doses MMR
- 3 doses Hep B vaccine
- 4 doses Polio vaccine
- Proof of 2 Varicella Vaccines or evidence of having had the Chickenpox
- Proof of a Tdap (adult tetanus/pertussis booster) *administered prior to 7-grade
- 1 dose of MenACWY * administered prior to 7– 9-grades

If your child is entering 9-12th grade, your child should have had the following:

- Tdap shot (adult tetanus/pertussis booster)
- 2 Varicella Vaccines or evidence of having had the Chickenpox
- 4 doses of Polio vaccine
- 3 Doses of Hepatitis B
- 2 Doses of MMR
- 11- 12-grade 2-doses of MenACWY received on or after 16 years of age

Please remember students may **NEVER** carry any medications of any type into the school building (Any exceptions must be arranged with the school nurse in advance). Medications must ALWAYS be delivered to the office by a parent with the appropriate permission forms on file in the nurse's office. In most cases, a physician's permission will be required as well, particularly for prescribed medications.

Both the MEDICATION PROTOCOL FORM and the *MEDICATION/EMERGENCY CARE FORM must be completed and submitted by August 1. Both of these forms must be filled out for each student every year. Copies of all medical forms are available in the school office or from the nurse. If you anticipate that your child will need an over-the-counter medication during the school year on a regular basis, you will need to provide the medication (in its original container). Medications are only administered according to the above guidelines unless an emergency arises.

If your child has a medication that will need to be administered during the school day or requires an emergency medication such as an epi-pen or inhaler, please have the necessary forms (available in the school office) filled out by your physician over the summer, and personally bring the medication to the nurse at the start of the school year. One form per medication is required by law. Be sure to check all expiration dates on medications prior to bringing them.

All medications must be picked up the last week of school. They will be held for one week after school ends before being discarded. Thank you for your immediate attention and prompt response to these matters. Please keep this page for your future reference.

Dayspring Christian Academy

MEDICATION PROTOCOL-YEARLY REQUIRED FORM FOR EACH STUDENT

The school nurse has written a doctor's order for the administration of the medications listed below. If you would like your child to have permission to receive these medications, when necessary, please initial medications below and sign where indicated: Permission must be renewed in writing every year. Consent may be withdrawn at any time by contacting the nurse's office. All medications must be brought to the nurse's office by a parent and proper paperwork must be filled out. This protocol covers only the medication listed below.

A SEPARATE FORM MUST BE FILLED OUT FOR EACH STUDENT. This form must be fully completed.

STUDENT NAME: _____ DOB: _____ GRADE: _____

I give the school nurse permission to administer the following:

* Ibuprofen (Motrin) _____ *Tylenol (acetaminophen) _____ Calamine lotion _____ Cough drops _____ Bacitracin

Ointment _____ *Benadryl (Diphenhydramine Hydrochloride) _____

Epinephrine in an emergency _____ All of the above _____ None of the above _____

Father's Name _____ Work phone _____ Email: _____

Mother's Name _____ Work phone _____ Email: _____

Mother's cell #: _____ Father's cell #: _____ Home #: _____

Address _____ City/State _____

Please list all medications your child is currently taking: _____

Please list all known allergies your child has: _____

Medical Concerns including any recent illness or surgery? _____

Student's Physician Name _____ Phone _____

Name/ID No. of Health Insurance Co. _____

Name/ID No. of Dental Insurance Co. _____

I give permission for the school nurse to administer the above medication(s) and to share relevant medical concerns with appropriate staff if needed (including bus and food service personnel).

Father's signature: _____ Date: _____

Mother's signature: _____ Date: _____

MEDICATION AND EMERGENCY CARE FORM

NO MEDICATION WILL BE GIVEN WITHOUT WRITTEN CONSENT ON FILE. ALL
MEDICATIONS WILL BE ADMINISTERED AT THE SCHOOL NURSE'S DISCRETION.

(This Form MUST BE returned with your enrollment forms.)

Dayspring Christian Academy Medication/Emergency Care Policy

The protocols below will be followed to administer medication to students during the school day:

1. Medication of any kind may NEVER be brought to school with the student. Any medication **must** be brought to school **by the parent or guardian in its original container**. Written permission and instructions for administration from a physician must accompany medication. Physician's order forms are available from the nurse and must be completed and signed before medication is administered. **Inhalers are to be kept in the nurse's office** (*unless a specific agreement has been made between the parent, school, and physician*). Dayspring Christian Academy will always make every effort to administer all medications according to a physician's order. If the medication schedule can be structured around the school day, we would ask that this accommodation be made. If students will be off campus (field trip, athletic event, etc.), parents should arrange with the school nurse, in advance, the plan to administer the medication. **This includes non-prescription, over-the-counter medications. All medications not included on the checklist provided need parent permission and a physician's order.**
2. If there is an unexpected need for medication (Tylenol, benadryl, epinephrine, etc.) and written permission is not on file, every effort will be made to contact the parent for consent before a medicine is administered. If the parent is unable to be reached, medicine will be given according to the school nurse's discretion.
3. List all medicines below that the child takes daily. List any adverse reactions with over-the-counter medicines, such as Tylenol or children's Ibuprofen.
4. It is the parent's responsibility to keep school medical records current. If there is a change in daily medicines, contact the school nurse immediately in writing.
5. If your child has an injury or serious illness requiring a visit to an Urgent Care, a hospital, and/or a physician, please submit documentation of the visit and any restrictions or releases (re: activity/gym/academics) on the day they return to school, including any special instructions, (i.e. medical, emotional, etc.).

I hereby authorize Dayspring Christian Academy to arrange for medical examination and/or treatment of my child, _____, should an emergency arise at school or any school activity. It is understood that a conscientious effort will be made by the school to contact me at the emergency numbers I have provided before any medical action is taken. In case of emergency, 911 will be called. The choice of hospital may be limited by the service. If the nurse is present and determines the child is in anaphylactic shock, she will administer epinephrine until the EMTs arrive.

Emergency Medical History and Allergies:

My child has the following medical conditions: _____ Name
medications that child is currently taking: _____ List all
allergies to medications, food, environmental, other: _____

Type of reaction: _____ Usual
course of action: _____

A copy of this form and other forms such as Health Care Emergency Action Plan may be sent with your child to the ER if available for purposes of communication of parent information and child's pertinent medical history.

I understand and will adhere to the Dayspring Christian Academy Medication/Emergency Care Policy

Guardian/Father's signature: _____ Date: _____

Guardian/Mother's signature: _____ Date: _____