

In order to register your child, you will need to pay the following:

Registration Fee,
Material Fee,
and the first installment of Tuition.

The above fees are non-refundable and non-transferable

**Your child will also need the following
forms in their file the *first* week of
school:**

_____ completed Registration Card

_____ **up to date Florida** Immunization Record (obtained from
physician)

_____ **up to date Florida** Health Record (obtained from
physician)

_____ completed Child Record form

_____ completed and **NOTARIZED** Medical Release Form

_____ completed Photo Release form

_____ completed Snack Permission Form

_____ completed Volunteer Acknowledgement

_____ completed Children and Discipline Form

_____ completed Flu Information Form (you will sign in August)

Methodist School for Early Education Registration Card

Today's date _____ Home phone # _____ (permission to publish in directory? Y N)

Child's name _____ Date of birth _____

First (Nickname if any) Middle Last _____ mo/day/yr

Female ____ Male ____ *Current* member of 1st United Methodist Church of Winter Park? Y__N__

Address _____ (permission to publish in directory? Y N)

Street City Zip code

Mother's name _____ Cellphone _____

Father's name _____ Cellphone _____

Dad's Business # _____ Mom's Business # _____

Email address _____

Local Emergency Contact (*other than parents!*):

Name

Phone

Allergies

Registering for:

Kindergarten _____ 5 day pre-k _____ 4 day pre-k _____ Young 4s _____

5 day 3s _____ 3 day 3s _____ Young 3s _____

3 day 2s _____ 2 day 2s _____ 1 day 2s _____

I understand that all fees are nonrefundable/non transferable

(parent signature)

Florida United Methodist Early Childhood Schools Association
EMERGENCY MEDICAL RELEASE FORM

(We) hereby grant permission for *The Methodist School for Early Education staff* to take whatever steps may be necessary to obtain emergency medical care if warranted. These steps may include, but are not limited to, the following:

- ◆ Attempt to contact parents or guardian (**please be sure we have correct phone numbers on file**)
- ◆ Attempt to contact the child's physician (listed below)
- ◆ Attempt to contact you through any of the persons listed in the emergency information below
- ◆ If we cannot contact you or your child's physician, we will do any or all of the following:
A) call another physician or paramedics B) call an ambulance C) have the child taken to an emergency hospital in the company of a staff member
- ◆ Any expense incurred under the above will be borne by the child's family
- ◆ The School **WILL NOT** be responsible for anything that may happen as a result of false medical or personal information given at the time of enrollment

Persons to contact in the event we cannot reach the parents or guardian
(PLEASE GIVE AT LEAST 2 NAMES)

Name	Phone #	Name	Phone #
1. _____	_____	2. _____	_____
3. _____	_____	4. _____	_____

Physician to contact in the event of an emergency:

Name	Phone #	Address
_____	_____	_____
_____	_____	_____

To Whom It May Concern:

I (We) hereby give my (our) consent to (name your choice of hospital) _____
to administer treatment to my (our) child _____ in the event of an
emergency at which time I (We) cannot be contacted. I (We) give consent to transport by ambulance if situation
warrants.

Parent(s) Signature _____

Subscribed and sworn to before me at _____, Florida
on this _____ day of _____, 20_____

Notary Public State of Florida at large _____

My commission expires _____

TUITION and FEES - Methodist School for Early Education 2020/2021

To REGISTER your child, you will need to:

1. pay the Registration fee
2. pay the Material fee
3. pay the 1st tuition installment

Registration:

There is a **\$80.00** NON-REFUNDABLE/NON-TRANSFERABLE registration fee (per child), which is **due when you register** your child.

Material Fee:

This NON-REFUNDABLE/NON TRANSFERABLE fee is **due when you register** your child. These fees are used to purchase educational and consumable supplies, and to HELP cover the cost of field trips when applicable (pre k and kindergarten classes).

<u>Class</u>	<u>Material Fee</u>	<u>Class</u>	<u>Material Fee</u>
Kindergarten	\$450.00	3 day 3s	\$225.00
5 day pre-kindergarten	\$315.00	5 day 2s	\$305.00
4 day pre-kindergarten	\$290.00	3 day 2s	\$225.00
Young 4s	\$290.00	2 day 2s	\$180.00
5 day 3s	\$315.00	Young 2s	\$180.00

Tuition:

Tuition is based on a ten month calendar, beginning in August and ending in May. **TUITION IS AN ANNUAL FEE** which can be divided, for your convenience, into **10 equal installments**. Tuition is payable on an annual, semi-annual, or monthly basis. Full year tuition installments are due August 1st, semi-annual installments are due August 1st and January 1st, and **monthly installments are due the first day of each month**. We offer the convenience of **TUITION EXPRESS**, an automated payment processing system that allows you to pay online, or thru automated deductions through your credit card, or checking account. **There is a \$20.00 late fee charged for tuition installments received in the office after the 10th of each month.** A **WRITTEN two-week notice** to the school office is required when withdrawing your child from the program for any reason. You will be responsible for payment during this two-week period whether or not your child is in the classroom.

FIRST MONTH'S INSTALLMENT IS DUE AT REGISTRATION (THIS IS ALSO NON-REFUNDABLE/NON-TRANSFERABLE). YEARLY / MONTHLY TUITION RATES:

<u>Class:</u>	<u>Tuition: year/month</u>	<u>Church member/2nd child</u>	<u>Class:</u>	<u>Tuition: year/month</u>	<u>Church member/2nd child</u>
Kindergarten	\$5200.00/\$520.00	\$5100.00/\$510.00	3 day 3s	\$3500.00/\$350.00	\$3400.00/\$340.00
5 day prek	\$4250.00/\$425.00	\$4150.00/\$415.00	5 day 2s	\$5900.00/\$590.00	\$5800.00/\$580.00
4 day prek	\$3800.00/\$380.00	\$3700.00/\$370.00	3 day 2s	\$3700.00/\$370.00	\$3600.00/\$360.00
Young 4s	\$3800.00/\$380.00	\$3700.00/\$370.00	2 day 2s	\$2800.00/\$280.00	\$2700.00/\$270.00
5 day 3s	\$4850.00/\$485.00	\$4750.00/\$475.00	Young 2s	\$2800.00/\$280.00	\$2700.00/\$270.00

Afternoon Enrichment fee will be \$18.00 per day (12:00 noon - 2:00 p.m.) - open to all children - **begins second week of school**
Church members receive a discount on tuition for each child. Non-church member families with *more than one* child enrolled in the school will receive a discount for the younger child (ren). Please note that because our expenses are continuous, no credit can be given for absences. No credit given for scheduled school holidays, vacation periods, or days cancelled due to weather emergencies or other unforeseen catastrophes. **WE FOLLOW ORANGE COUNTY PUBLIC SCHOOLS EMERGENCY PLAN ON DAY ONE. AFTER DAY ONE**, please call the school office for message on answering machine. If there is no message, we have no electrical power or we have sustained damage to our building and, therefore, are not able to conduct classes. We also have plans for *in-house* emergencies. Emergency days will NOT be made up unless Methodist School Board of Education advises. The Methodist School for Early Education admits students of any race, color, and national, or ethnic origin.

Information for Child's Record

Date of this record _____

1. Child's Name _____ Male _____ Female _____
Nickname _____ Do you wish your child to be called by nickname? _____

2. Date of Birth _____
Mo Day Yr
Place of birth _____
City County State

3. Home Address _____
Street City Zip code
Home Phone # _____ Cell phone #s _____
E mail address _____

4. Check one: Parent(s) _____ Guardian(s) _____
Father's name _____ Mother's name _____
Occupation _____ Occupation _____
Business Phone _____ Business Phone _____
Religious Denomination _____ Religious Denomination _____
Are you currently members of 1st United Methodist Church of Winter Park? _____
Marital Status _____ Marital Status _____

5. Please list the names and birth dates of brothers and/or sisters, indicate which school they attend or where they are employed (if applicable)

6. With whom does child live?

_____ both parents _____ both grandparents
_____ father _____ grandfather
_____ mother _____ grandmother
_____ other (please explain) _____

7. Is child adopted? _____

If so, what has child been told about his/her adoption? _____

8. Characteristics of this child. (use back of sheet to give details you believe may be helpful in understanding this child)

Yes No

_____	_____	Does child play with other children of same sex?
_____	_____	Of opposite sex?
_____	_____	Of younger age?
_____	_____	Of older age?
_____	_____	Does child get along with his/her playmates?
_____	_____	Does he/she bring friends home?
_____	_____	Does he/she visit in the homes of friends?
_____	_____	Does he/she attend Sunday School?
_____	_____	Does he/she enjoy listening to stories/books?
_____	_____	Do you often read to your child?
_____	_____	Does he/she listen to the radio/cds/tapes?
_____	_____	Does he/she watch television/movies?

9. What method of discipline is your child accustomed to? _____

What methods are most effective? _____

Do parents agree on method? _____

10. How many hours of night sleep does your child get? _____

Are there any sleep problems? _____ If yes, please give examples _____

Does child nap daily? _____

11. Is your child right handed? _____ left handed? _____ undecided? _____

12. Are there any food allergies? _____ If yes, please list _____

Is there any vomiting with food allergies? _____ Refusal to eat? _____

Please list **any other allergies** _____

Does child require use of EpiPen? _____

13. Are there any problems in relation to toilet habits? _____

14. Does your child exhibit any of the following behaviors?

Thumbsucking? _____

Speech difficulties? (stuttering, etc.) _____

Vision problems? _____

Does he/she wear corrective shoes? _____

15. Does he/she exhibit any behavior which worries you? _____

Give examples _____

16. Has child been away from family before? _____
How does he/she react to your leaving? _____

17. What one word will best describe your child? _____
What do you enjoy most about your child? _____

18 is for pre k and kindergarten children only

Will you give permission for your child to make educational excursions from the school under adequate supervision? (Parents will be driving their own vehicles)

_____ Yes _____ No

Signature _____

Would you like to transport (and chaperone) children on a field trip? _____ Yes _____
No

How many seatbelts does your vehicle have? _____

19. Will you give permission for your child to be photographed for newspaper articles, TV coverage, etc. promoting school related activities? _____ Yes _____ No

Signature _____

20. In case of an emergency, which physician should we contact?

Name _____ Phone # _____

21. Would you give permission to call 911 in the event of an emergency _____ Yes _____ No

Signature _____

(every effort will be made to contact parents)

22. Whom should we call if child's parents are not available?

Name _____ Phone # _____

Relationship to child? _____

23. Who will transport child to/from school? _____

24. What led you to select Methodist School for enrollment? _____

25. What do you expect your child to gain from attending preschool? _____



VOLUNTEER ACKNOWLEDGEMENT

I attest my name is _____ and
(print volunteer/foster grandparent name)

serve in the child care program known as _____
(print name of child care program)

I serve as a (check one)

- ☐ Volunteer – As a volunteer, I do not receive any form of payment or compensation such as money, free or reduced child care, or any other type of compensation for my time. I also understand that as a volunteer, I must be under the constant supervision of a trained and screened staff person and may not be left alone or in charge of any group of children. If I volunteer 10 hours or more per month, or receive some form of compensation, I understand that I must submit background screening information in accordance with section 402.302(3), Florida Statutes, and complete the state mandated training requirements.
- ☐ Foster Grandparent – As a foster grandparent, I adhere to all of the Foster Grandparent Program Guidelines pursuant to Title 45, Public Welfare, Code of Federal Regulations, section 2552.75. I also understand I must be under the constant supervision of a trained and screened staff person and may not be left alone or in charge of any group of children. I must begin training within 30 days of working in the child care industry in any Florida child care facility and have the following courses completed, either by instructor-led or online, within one year from the working start date: Child Care Facility Rules and Regulations; Health, Safety and Nutrition; Identifying and Reporting Child Abuse and Neglect; and Special Needs Appropriate Practices.

I attest that I have read and that I understand the foregoing.

Volunteer/Foster Grandparent Signature

Date

To Be Completed by the Owner/Operator/Director

I attest my name is _____, and I
(print owner/operator/director name)

am the owner/operator/director of the child care program identified above. The above
(circle one)

individual serves, under the above definition, as a volunteer/foster grandparent in this child care program.

I attest that I have read and that I understand the foregoing.

Owner /Operator /Director Signature

Date

Children and Discipline

We are committed to the belief that children learn best in an atmosphere which values and respects the uniqueness of each individual child. We believe that an important part of our teaching task involves helping children develop an inner discipline. This means we must provide reasonable rules, logical consequences for breaking those rules, and be willing to give more personal responsibility to the children as they are able to assume it.

In this program we utilize positive techniques of guidance, including redirection, anticipation and elimination of potential problems, positive reinforcement, and encouragement. As the circumstances may require, we will use supervised time apart from the group. Consistent, clear rules and daily routines are established and we stress the importance that they be followed by everyone.

In the event of any persisting problem with your child, we will work closely with you so that together with our mutual understanding and reinforcement we can direct a behavioral pattern. If a child has continual difficulty controlling behavior to the extent that there is continual disruption to the class, making it impossible for others to have a successful school experience, a conference will be necessary to determine the continuation of the child in our program.

Remember that a crisis at home affects the child's behavior at school. Let us know the joyous happenings, the upsetting experiences, or important changes at home which may affect behavior. It is also important to let teachers know what a child has been told about an impending birth, serious illness, being adopted, or a recent death so any conversation can follow with complete empathy.

In all events, we like to consider this a joint venture with you in a mode of continuing development for your child.

- Section 65C-22.006(2) F.A.C. requires a current physical examination (Form 3040) and immunization record (Form 680 or 681) within 30 days of enrollment. Please note some children may be on a delayed immunization schedule.
- Section 402.3125(5), F.S. requires that parents receive a copy of the Child Care Facility Brochure, "Know Your Child Care Facility" (CF/P1 175-24)
- Section 65C-22.006(3)(c), 2, F.A.C., requires that all parents are notified in writing of the disciplinary practices used by the child care facility.

Your signature below indicates that you have received the above items and that the information on this enrollment form is complete and accurate, as well as granting consent for child care personnel to have access to child's records.

Signature of Parent/Guardian

Date



PHOTOGRAPHY AND IMAGE ASSIGNMENT, WAIVER AND RELEASE (FOR ADULT)

Please complete and return this Assignment, Waiver and Release **ONLY** if you **DO CONSENT** to the First United Methodist Church of Winter Park's publication of your image and likeness. **If you DO NOT CONSENT to the Church's publication of your image and likeness, please complete the OPT-OUT section at the bottom of the page.**

I, the undersigned, for valuable consideration received, and for being allowed access to property, activities, or events belonging to or affiliated with First United Methodist Church of Winter Park, expressly assign to First United Methodist Church of Winter Park and the Florida Conference of the United Methodist Church, and to all of their current, former and future agents, schools (including the Methodist School for Early Education and Trinity Christian Academy) and related entities and affiliates (collectively, the "Church"), all rights, title and interest in, and to, the use of my image or likeness, including, but not limited to, all videotape recordings, photographs, or audio recordings of, or made by, me (the "Property") on Church property, during Church-sponsored events, or for any other Church purpose. The Church shall have the right to assign its rights in the Property, in whole or in part, to any school or other entity within the Church, without my consent.

I voluntarily consent to and authorize the Church and its employees, independent contractors, volunteers or other agents to take, reproduce and release photographs, videos and audio recordings of me. I hereby irrevocably grant the Church perpetually and exclusively, the right to use and incorporate (alone or together with other materials), in whole or in part, the Property, in any Church publication, news release, social media outlet or for any other purpose. Further, I hereby authorize the reproduction, sale, lease, copyright, exhibition, broadcast and/or distribution of the Property without limitation for any purposes whatsoever and I further waive all rights to any compensation for my appearance or participation in the Property. I understand and have been advised that the Property may be used in publications, websites and other materials produced from time to time by the Church. I further understand that the Church has no control over the use of Property taken by media that may be covering an event at the Church in which I participate.

I hereby waive any claims against and release the Church, its current, former and future religious, employees, independent contractors, volunteers, agents, representatives, affiliates, successors and assigns from and against any and all claims, demands, actions, causes of actions, suits, costs, expenses, liabilities, and damages whatsoever that I may have against the Church in connection with the taking, reproduction and/or use of the Property.

I acknowledge that the Church cannot control all photographic access to its properties, and that my name may be printed with the Property. I represent that I am eighteen years of age or older and that I have thoroughly read and understand the terms of this Assignment, Waiver and Release.

Signature: _____ Date: _____

Print Name: _____

PHOTOGRAPHY AND IMAGE OPT-OUT

*Please complete and return THIS SECTION **ONLY** if you **DO NOT CONSENT** to the Church's publication of your image and likeness.

I, the undersigned, do not consent to the Church's publication of my image or likeness, including any photos, videos or audio recordings of me. I understand that the Church will make reasonable efforts to comply with this request. I further understand that the Church has no control over the use of my image or likeness taken by a third-party or media that may be covering an event at the Church in which I participate. If I become aware of any reproduction or publication of my image or likeness, I will immediately notify the Church of the same.

Signature: _____ Date: _____

Print Name: _____

PHOTOGRAPHY AND IMAGE ASSIGNMENT, WAIVER AND RELEASE (FOR MINOR CHILD)



Please complete and return this Assignment, Waiver and Release **ONLY** if you **DO CONSENT** to the First United Methodist Church of Winter Park's publication of your minor child(ren)'s image and likeness. If you **DO NOT CONSENT** to the Church's publication of your minor child(ren)'s image and likeness, please complete the OPT-OUT section at the bottom of the page.

I, the undersigned, for valuable consideration received, and for being allowed access to property, activities, or events belonging to or affiliated with First United Methodist Church of Winter Park, expressly assign to First United Methodist Church of Winter Park and the Florida Conference of the United Methodist Church, and to all of their current, former and future agents, schools (including the Methodist School for Early Education and Trinity Christian Academy) and related entities and affiliates (collectively, the "Church"), all rights, title and interest in, and to, the use of my child(ren)'s image or likeness, including, but not limited to, all videotape recordings, photographs, or audio recordings of, or made by, my child(ren) (the "Property") on Church property, during Church-sponsored events, or for any other Church purpose. The Church shall have the right to assign its rights in the Property, in whole or in part, to any school or other entity within the Church, without my consent.

I voluntarily consent to and authorize the Church and its employees, independent contractors, volunteers or other agents to take, reproduce and release photographs, videos and audio recordings of my child(ren). I hereby irrevocably grant the Church perpetually and exclusively, the right to use and incorporate (alone or together with other materials), in whole or in part, the Property, in any Church publication, news release, social media outlet or for any other purpose. Further, I hereby authorize the reproduction, sale, lease, copyright, exhibition, broadcast and/or distribution of the Property without limitation for any purposes whatsoever and I further waive all rights to any compensation for my child(ren)'s appearance or participation in the Property. I understand and have been advised that the Property may be used in publications, websites and other materials produced from time to time by the Church. I further understand that the Church has no control over the use of Property taken by media that may be covering an event at the Church in which my child(ren) participate(s).

I hereby waive any claims against and release the Church, its current, former and future religious, employees, independent contractors, volunteers, agents, representatives, affiliates, successors and assigns from and against any and all claims, demands, actions, causes of actions, suits, costs, expenses, liabilities, and damages whatsoever that I and/or my child(ren) may have against the Church in connection with the taking, reproduction and/or use of the Property.

I acknowledge that the Church cannot control all photographic access to its properties, and that my child(ren)'s name may be printed with the Property. I represent that I am eighteen years of age or older, that I am the parent or legal guardian of the child(ren) listed below and that I have thoroughly read and understand the terms of this Assignment, Waiver and Release.

Names of minor child(ren): _____

Signature of Parent/Legal Guardian: _____ Print name: _____ Date: _____

Signature of Parent/Legal Guardian: _____ Print name: _____ Date: _____

PHOTOGRAPHY AND IMAGE OPT-OUT

*Please complete and return THIS SECTION **ONLY** if you **DO NOT CONSENT** to the Church's publication of your minor child(ren)'s image and likeness.

I, the undersigned, do not consent to the Church's publication of my minor child(ren)'s image or likeness, including any photos, videos or audio recordings of my minor child(ren). I understand that the Church will make reasonable efforts to comply with this request. I further understand that the Church has no control over the use of my child(ren)'s image or likeness taken by a third-party or media that may be covering an event at the Church in which my child(ren) participate(s). If I become aware of any reproduction or publication of my child(ren)'s image or likeness, I will immediately notify the Church of the same.

Names of minor child(ren): _____

Signature of Parent/Legal Guardian: _____ Print name: _____ Date: _____

Signature of Parent/Legal Guardian: _____ Print name: _____ Date: _____

Please complete both sides of form.

During the 2009 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes provide parents with information detailing the causes, symptoms, and transmission of the influenza virus (the flu) every year during August and September.

My signature below verifies receipt of the brochure on *Influenza Virus, The Flu, A Guide to Parents*:

Name: _____

Child's Name: _____

Date Received: _____

Signature: _____

Please complete and return this portion of the brochure to your child care provider, in order for them to maintain it in their records.



What should I do if my child gets sick?

Consult your doctor and make sure your child gets plenty of rest and drinks a lot of fluids. Never give aspirin or medicine that has aspirin in it to children or teenagers who may have the flu.

CALL OR TAKE YOUR CHILD TO A DOCTOR RIGHT AWAY IF YOUR CHILD:

- Has a high fever or fever that lasts a long time
- Has trouble breathing or breathes fast
- Has skin that looks blue
- Is not drinking enough
- Seems confused, will not wake up, does not want to be held, or has seizures (uncontrolled shaking)
- Gets better but then worse again
- Has other conditions (like heart or lung disease, diabetes) that get worse



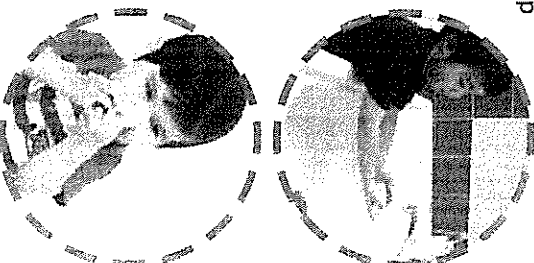
How can I protect my child from the flu?

A flu vaccine is the best way to protect against the flu. Because the flu virus changes year to year, annual vaccination against the flu is recommended. The CDC recommends that all children from the ages of 6 months up to their 19th birthday receive a flu vaccine every fall or winter (children receiving a vaccine for the first time require two doses). You also can protect your child by receiving a flu vaccine yourself.

What can I do to prevent the spread of germs?

The main way that the flu spreads is in respiratory droplets from coughing and sneezing. This can happen when droplets from a cough or sneeze of an infected person are propelled through the air and infect someone nearby. Though much less frequent, the flu may also spread through indirect contact with contaminated hands and articles soiled with nose and throat secretions. To prevent the spread of germs:

- Wash hands often with soap and water.
- Cover mouth/nose during coughs and sneezes. If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.
- Limit contact with people who show signs of illness.
- Keep hands away from the face. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.



When should my child stay home from child care?

A person may be contagious and able to spread the virus from 1 day before showing symptoms to up to 5 days after getting sick. The time frame could be longer in children and in people who don't fight disease well (people with weakened immune systems). When sick, your child should stay at home to rest and to avoid giving the flu to other children and should not return to child care or other group setting until his or her temperature has been normal and has been sign and symptom free for a period of 24 hours.

For additional helpful information about the dangers of the flu and how to protect your child, visit: <http://www.cdc.gov/flu/> or <http://www.immunizeflorida.org/>

MSEE Snack and Food Guidelines

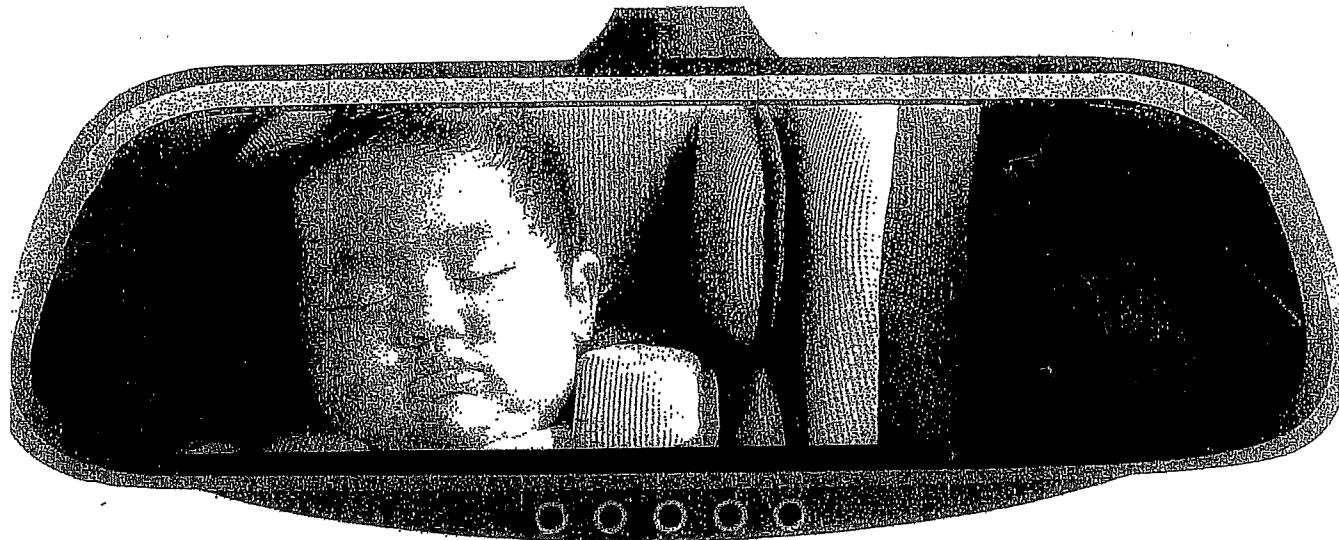
Preschool snack is a special time for the children to gather and share food and conversation with each other. During the school year the children will take turns bringing the "snack basket" home to refill. Snacks should be healthy. It is not necessary to send in juice, as we give the children water. Your child's teacher will notify you of the weekly rotation.

For the health and safety of your child, children with food concerns will be asked to bring in their own snack from home each day.

I give permission for my child, _____ to participate in
Snacks provided at the Methodist School for Early Education.

Signed _____

Date _____

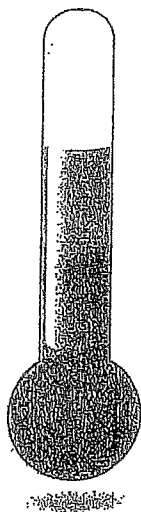


FACTS ABOUT HEATSTROKE:

It only takes a car **10 minutes** to heat up **20** degrees and become deadly.

Even with a **window cracked**, the temperature inside a vehicle can cause heatstroke.

The body temperature of a child increases **3 to 5 times faster** than an adult's body.



⚠️ PREVENTION TIPS:

- Never leave your child alone in a car and call 911 if you see any child locked in a car!
- Make a habit of checking the front and back seat of the car before you walk away.
- Be especially mindful during hectic or busy times, schedule or route changes, and periods of emotional stress or chaos.
- Create reminders by putting something in the back seat that you will need at work, school or home such as a briefcase, purse, cell phone or your left shoe.
- Keep a stuffed animal in the baby's car seat and place it on the front seat as a reminder when the baby is in the back seat.
- Set a calendar reminder on your electronic device to make sure you dropped your child off at child care.
- Make it a routine to always notify your child's child care provider in advance if your child is going to be late or absent; ask them to contact you if your child hasn't arrived as scheduled.

During the 2018 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes to provide parents, during the months of April and September each year, with information regarding the potential for distracted adults to fail to drop off a child at the facility/home and instead leave them in the adult's vehicle upon arrival at the adult's destination.



My signature below verifies receipt of the Distracted Adult brochure

Parent/Guardian:

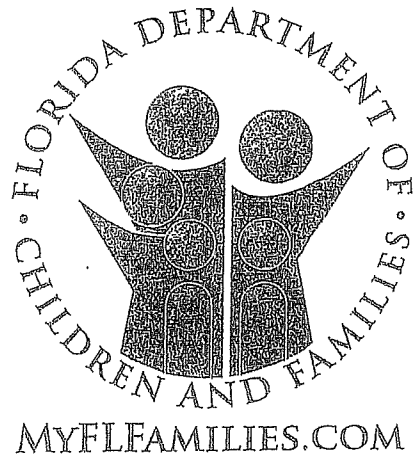
Child's Name:

Date:

9-1-20

Please complete and return this portion of the brochure to your child care provider, to maintain the receipt in their records.

A change in daily routine, lack of sleep, stress, fatigue, cell phone use, and simple distractions are some things parents experience and can be contributing factors as to why children have been left unknowingly in vehicles...



Developed by:

The Office of Child Care Regulation

www.myflfamilies.com/childcare
CF/PI 175-12, May 2018

When life happens...Don't be a
**DISTRACTED
ADULT**

