

Horizons Unlimited Christian Academy

Enrollment Package



Horizons Unlimited
CHRISTIAN ACADEMY



State of Florida
Department of Children and Families
CHILD CARE APPLICATION FOR ENROLLMENT

Student Information: Date of Birth: _____ Sex: ____ Date of Enrollment: _____

FullName: _____
Last First Middle Nickname

Child's Physical Address: _____

Primary Hours of Care: From _____ To _____

Days of the Week in Care: M T W Th F Sa Su

Meals Typically Served While in Care: Br AM Snack Lunch PM Snack Sup Eve Snack

Family Information: Child Lives With: _____

Mother's Name: _____ Father's Name: _____

Address: _____ Address: _____

Home Phone: _____ Home Phone: _____

Employer: _____ Employer: _____

Address: _____ Address: _____

Work Phone: _____ /Cell: _____ Work Phone: _____ /Cell: _____

Custody: Mother _____ Father _____ Both _____ Other _____

Medical Information:

I hereby grant permission for the staff of this facility to contact the following medical personnel to obtain emergency medical care if warranted.

Doctor: _____ Address: _____ Phone: _____

Doctor: _____ Address: _____ Phone: _____

Dentist: _____ Address: _____ Phone: _____

Hospital Preference: _____

Please list allergies, special medical or dietary needs, or other areas of concern:

Contacts:

Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident or emergency, if for some reason, the custodial parent or legal guardian cannot be reached:

Name	Address	Work#	Home#
Name	Address	Work#	Home#
Name	Address	Work#	Home#
Name	Address	Work#	Home#

Helpful Information About 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.
- Section 402.3125(5), F.S., requires that parents receive a copy of the Child Care Facility Brochure, "Know Your Child Care Facility" (CF/PI 175-24), **or** Section 65C-20.11(2)(c)(1), F.A.C., requires that parent(s) receive a copy of the family day care home brochure, "Selecting A Family Day Care Home Provider" (CF/PI 175-28).
- Section 65C-22.006(3)(c)2., F.A.C., requires that parents are notified in writing of the disciplinary practices used by the child care facility, **or** Section 65C-20.010(6)(c), F.A.C., requires that a written a copy of the family day care provider's discipline policy be available for review by the parent(s).

Your signature below indicates that you have received the above items and that the information on this enrollment form is complete and accurate.

Signature of Parent/Guardian

Date

HEALTH HISTORY

Please list any medical conditions, injuries, illnesses, allergies, medications of which we need to be aware of:

Is your child under the care of a physician, psychologist for any condition? Please explain.

Note: Students entering Horizons Christian Academy must have a Student Health Examination Form - DH Form 3040 and the Florida Certificate of Immunization - DH Form 680 (only available from doctor).

EDUCATIONAL/CHILD CARE HISTORY

Please list any schools or child care centers the student has attended.

PARENTS' AFFIRMATION OF AGREEMENT

By signing below, we the parents or guardians of this student affirm that we have given completely truthful information herein; that we have received, read, understand, and will abide by the policies and agreements, namely: (1) Statement of Doctrinal Beliefs, (2) Parents'/Guardians' Statement of Support, and (3) Dress Code and Discipline Policies.

Parent's Signature _____

Date _____

Parent's Signature _____

Date _____

Horizons Unlimited Christian Academy admits qualified students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. Horizons Unlimited Christian Academy does not discriminate on the basis of race, color, sexual orientation, national and ethnic origin in the administration of its educational policies, admissions policies, and any other school-administered programs.



Classroom Student Information Form

Student's Name _____ Date of Birth _____

Parent Name _____ Main Phone _____

Parent Email: _____

Place of Employment _____ Phone Number _____

Parent Name _____ Main Phone _____

Place of Employment _____ Phone Number _____

In case of an **emergency** and neither parent can be reached, who shall we contact next?

Name _____ Phone Number _____

Additional Information _____

Pediatrician's Name _____ Phone Number _____

List Individuals Authorized to pick up your child:

Name	Relationship	Phone Number

Please provide us with any additional information you deem necessary.

Parent Signature

Date



Horizons Unlimited Christian Academy Media Release Form

Horizons Unlimited Christian Academy may develop, participate in or be the subject of media-based presentations and events that highlight various activities and events occurring during the course of the year. These may be the HUCA staff, volunteers, and students or local news media and may include but are not limited to:

- Videotapes
- Computer generated presentations, which may incorporate scanned photographs and video clips
- Computer based productions transmitted via telecommunications
- Photographs
- Slide/tape presentations

Media based presentations may be used in:

- Parent programs
- Staff developed activities
- Media Festivals
- Public Relations (newspaper articles, television presentations, etc.)
- Productions by the commercial media for use in news or feature story presentations or articles (Note: professional media presentations may require additional release.)

Signing this release allows or denies Horizons permission to use the child's name, and/or voice, likeness and any or all of the audio or video footage in any of Horizons activities.

*****PLEASE SIGN ONLY ONE AREA BELOW*****

I **grant** permission and release use of the name, voice, likeness or combination of any of the three for the purpose listed above on this form for _____ during the school year. My signature also represents that I am legal guardian of said child.

Parent Signature

Date

I **do not** grant permission or release use of the name, voice, likeness or combination of any of the three for the purpose listed above on this form for _____ during the school year. My signature also represents that I am legal guardian of said child.

Parent signature

Date



Horizons Unlimited Christian Academy

Attendance Policy

Prior to enrolling your child(ren) we ask that you please consider our Attendance Policy.

It is mandatory for all enrolled children to attend school each day. The only exception(s) are illness with a doctor's note, doctor's appointment with note, pre-authorized absence arrangement made with a school administrator, or part-time non-VPK children.

- Children receiving School Readiness funding may not be absent more than 3 days per month. Should absences exceed this amount, we will need a doctor's note excusing the absence.
- Parents keeping their children home for more than 3 days unexcused absence will be billed for additional days of absence.
- Unexcused absences beyond 3 days will result in your child's spot being taken by someone on the waiting list.
- All children, with the exception of part-time non-VPK students, must arrive and be signed in no later than 9:15 a.m.
- All parents of VPK children must be sure to sign their child in daily and verify the attendance at the end of each month.
- Consistently late arrivals will result in same above measures.

Please sign below indicating you have read, understand and agree to this Attendance Policy.

Print Name

Date

Parent's Signature

Date



PARENT/GUARDIAN ACKNOWLEDGEMENT:

I/We, _____, the parent(s)/legal guardian(s) of _____, acknowledge that I/We have received a copy of Horizons Unlimited Christian Academy's Parent Handbook and have been given the opportunity to read the manual and ask questions about and understand the policies contained therein. Furthermore, I/We agree to abide by the policies set forth in the manual.

I/We have attended a Parent Orientation, which covered the policies contained in the Parent Handbook on _____.

I/We understand that the policies described in the Parent Handbook are not conditions of enrollment, and the language does not create a contract between Horizons Unlimited Christian Academy and the parents. Horizons Unlimited Christian Academy reserves the right to alter, amend, or otherwise modify these guidelines, in its sole discretion, without prior notice.

Signature: _____

Date: _____

Print Name: _____

Signature: _____

Date: _____

Print Name: _____

Horizons Unlimited

CHRISTIAN ACADEMY

IMPORTANT

This child care facility is licensed according to the minimum licensure standards included in section 402.035, Florida Statutes (F.S.) and Chapter 65C-22, Florida Administrative Code (F.A.C.)

Know Your Child Care Facility

This flyer is given to all parents/guardians to provide information about their role within a quality child care center, the requirements of a quality child care center, and what a quality child care center has to offer to children and families.

My signature below verifies receipt of the flyer "Know Your Child Care Facility."
Parent(s)/Guardian(s) will maintain this flyer as documentation certifying the flyer has been received, read, and in the child's file.

Name: _____

Child's Name: _____

Sibling(s): _____

Date Received: _____

Signature: _____

** Please complete and return this signed document with enrollment packet. Thank you*

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





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:

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

What is the influenza (flu) virus?

Influenza ("the flu") is caused by a virus which infects the nose, throat, and lungs. According to the US Center for Disease Control and Prevention (CDC), the flu is more dangerous than the common cold for children. Unlike the common cold, the flu can cause severe illness and life threatening complications in many people. Children under 5 who have the flu commonly need medical care. Severe flu complications are most common in children younger than 2 years old. Flu season can begin as early as October and last as late as May.



How can I tell if my child has a cold, or the flu?

Most people with the flu feel tired and have fever, headache, dry cough, sore throat, runny or stuffy nose, and sore muscles. Some people, especially children, may also have stomach problems and diarrhea. Because the flu and colds have similar symptoms, it can be difficult to tell the difference between them based on symptoms alone. In general, the flu is worse than the common cold, and symptoms such as fever, body aches, extreme tiredness, and dry cough are more common and intense. People with colds are more likely to have a runny or stuffy nose. Colds generally do not result in serious health problems, such as pneumonia, bacterial infections, or hospitalizations.

For additional information, please visit
www.myflorida.com/childcare or contact your
local licensing office below:

CF/PI 175-70, June 2009

This brochure was created by the Department of Children and Families in consultation with the Department of Health.

INFLUENZA VIRUS

"The Flu"
A Guide
for Parents



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/>

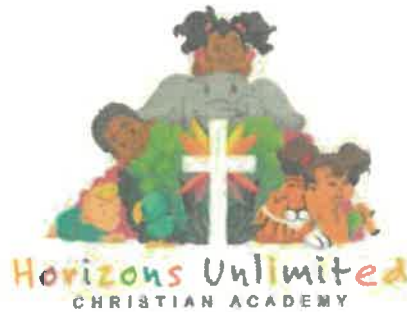


2674 Dr. Martin Luther King Way
Sarasota, FL 34234
Phone: 941-957-409
Fax: 941-957-0497
E-Mail: hchristian1@verizon.net

Screening Agreement

As the parent of _____ I consent to having him/her screened periodically by his/her teacher for developmental purposes during the school year. I understand that I will receive a copy of the screening results.

Signature: _____



Horizons Unlimited Christian Academy's Parking Policy

I clearly understand I must utilize designated parking spaces when dropping my child off to school. I will not block the driveway preventing other vehicles from parking and/or pulling into the driveway. I understand the entry must be clear for other vehicles to enter. When others must bring my child to school, I will inform and encourage them to follow these procedures.

My signature below indicates I agree with this policy and will follow through as long as my child is a student at Horizons Unlimited Christian Academy.

Signature: _____ Date: _____

UPDATED COVID-19 GUIDANCE

STUDENT OR
EMPLOYEE TESTS
POSITIVE FOR
COVID-19

RETURN TO SCHOOL AFTER

5

DAYS IF THEY
ARE FEVER-FREE
FOR 24 HOURS.
NO ADDITIONAL
TESTING IS REQUIRED.

STUDENTS OR EMPLOYEES WHO **DO NOT TEST POSITIVE FOR COVID-19**
OR **DEVELOP SYMPTOMS** SHOULD NOT BE REQUIRED TO QUARANTINE.

EMPLOYEES ARE NO LONGER REQUIRED TO WEAR FACIAL COVERINGS

CHILD CARE FACILITIES SHOULD **NEVER** FORCE CHILDREN TO WEAR MASKS



Additional Information Request for New Enrollees

Please take a moment to inform us of the likes and dislikes of your child, as well as information we should know regarding assisting your child to adapt to our program and help us to better understand him/her.
