

### MOM'S MORNING OUT REGISTRATION FORM

Child's Full Name		Date o	f Birth/	/
Home Address				
City, State, Zip				
Preferred email				
Parent's Name				
Home Phone	Cell	W	ork	
Parent's Name				
Home Phone	Cell	V	Vork	
Family Preferred Email				
Child Lives with (circle one)	Both Parents	One Parent Only	Grandparents	Other
Is there any needed informat	ion regarding chi	ld's living situation?		
Does your child have any alle	rgies? If so, to wh	nat and how are they	manifested?	

Please provide any additional information that you feel is important for us to have concerning your child (fears, health issues, developmental delays, family situations, etc.)

I would like to enroll my child for (check one)

\_\_\_\_\_ One Day - Please circle the day- Mondays, Tuesdays or Thursdays

\_\_\_\_\_ Two Days – Please circle the two days – Mondays, Tuesdays, Thursdays

\_\_\_\_\_Three Days - Mondays, Tuesdays and Thursdays

Enrolled:

One day per week/\$70.00 per month Two days per week/\$140.00 per month Three days per week/\$200.00 per month Sibling Discount: \$10.00 off for second sibling attending

### Monthly Tuition is due the 1<sup>st</sup> of each month. Late after the 10<sup>th</sup> of the month.

\*Please note that tuition is paid even if your child is absent for any reason and there are no make-up days.

#### Non-enrolled:

- 1. Daily Fee of \$30.00 on a first come basis. Must call or email in advance.
  - a. That includes a \$5.00 Material Fee for the day

SIBLING DISCOUNT: \$5.00 off for second sibling attending

#### **Registration Fee:**

- 1. Enrollment Fee of \$50 Paid Annually at time of enrollment.
- 2. Material Fee of \$75.00 paid Bi-annually Equaling \$150 for the MMO year (Aug to Aug)

Both fees are Non-Refundable.

Parent Signature	Date	
MMO Staff Signature	Date	

### FIRST PRESBYTERIAN CHURCH EUSTIS MEDICAL EMERGENCY TREATMENT CONSENT FORM

I \_\_\_\_\_\_, and on behalf my child \_\_\_\_\_\_\_ for myself, my heirs and personal representatives, hereby freely and voluntarily assume all liabilities, risks, injuries, and hazards incidental to the participation in any and all programs sponsored and/or coordinated by First Presbyterian Church of Eustis, Florida whether due to negligence or the negligence of others including but not limited to transportation to or from said activity.

I acknowledge that Mom's Morning Out," (The Program) may/or does involve physical contact with inherent risks or other conditions where injuries may occur. I do hereby waive, release and agree to hold harmless First Presbyterian Church of Eustis, Florida, its officers, agents, employees, the organizers, sponsors, activity supervisors, co-sponsoring organizations, and participants for any claim, demand liability costs, suits, charges, or compensation for loss due to injury or any kind arising out of a loss or an injury. I acknowledge that First Presbyterian Church of Eustis, Florida will not assume any costs relating to any injury or cost of damage while my child is involved in activities of mission, fellowship, education and worship. I acknowledge that, absent this Medical Emergency Treatment Consent Form, the First Presbyterian Church of Eustis, Florida or other sponsors of the activity would not have offered me access to this activity because of unacceptable exposure to liability claims or the expense providing a program that is risk-free.

In order to expedite the care of my child named above, I give permission for the appropriate medical personnel and staff to initiate treatment immediately upon arrival at the appropriate facility. I agree to be financially responsible for my child's treatment. I also request that I or the alternate emergency contact person listed be notified of my child's condition and admission as soon as possible.

In the event of a life-threating accident or illness, I understand that First Presbyterian Church of Eustis, Florida or its representatives or agents in charge of the activity, may contact 911 services immediately. I agree to be financially responsible for my child's care and treatment.

\*Please attached copy of child's insurance information.

Emergency Conta	act Information:		
1. Parent or Lega	l Guardian's Name		
Home Number	Cell	Work	
2. Parent or Lega	l Guardian's Name		
Home Number	Cell	Work	
Emergency Conta	act (Friend or Relative NOT Living In The	<u>e Home)</u>	
Name			
Relationship to C	hild		
Home Number	Cell	Work	
l accept, _			,
	Signature of parent or legal guardian	date: /	/

F-5232019-MAB

# First Presbyterian Church Eustis MOM'S MORNING OUT POLICIES AND INFORMATION

### Mom's Morning Out:

First Presbyterian Church of Eustis Mom's Morning Out is a ministry for both children and parents. Our purpose is to provide a loving environment for children to learn through play, while offering mothers, fathers or caretakers time for life as needed. We invite you to visit our facilities for a tour. To schedule a visit or for additional information contact the Church Office at: 352-357-2833 or office@fpceustis.com

### Mission Statement:

FPCE Mom's Morning Out is a program designed to provide young children with experiences that correspond to their individual intellectual, social, emotional and physical needs. Our focus is on independence, social growth and an introduction to structured environments where children learn to interact with other children in a safe, fun, loving atmosphere. FPCE MMO offers an environment where Christian values are demonstrated and young children's faith can grow.

### **Educational Philosophy:**

The curriculum content at MMO is designed to achieve long range goals for children in social, emotional, cognitive and physical development. This is done by introducing age appropriate learning objectives through a balance of teacher and child facilitated skill building activities. The children will engage in literature, Bible story time, music, art, free play and outdoor play.

### Age of Children:

18 months old until they become eligible for Kindergarten (those who turn 5 during the program year may continue to participate in the program until July 31<sup>St</sup>)

# Days and Times:

Monday, Tuesday, and Thursday 9am-12pm

- Drop off Time: 8:45am -gate opened and closed at 9:30am
- <u>Pick up time:</u> 12pm gate opened at 11:45am
  - A late pick-up fee of \$10 will be charged for every 15 minutes past 12:15
  - MMO will be closed Labor Day, Veterans Day, Thanksgiving week, Christmas week, Martin Luther King Jr. Day, Presidents Day, Memorial Day and July 4th

Tuition: (Due 1st of each month)

- One day per week/ \$70 per month
- Two days per week/ \$140 per month
- Three days per week/ \$200 per month
- Sibling Discount: \$10/month /sibling
- Payable by check or MO made out to FPCE with MMO+Child's Name on memo line

## Non-enrolled:

Daily Fee of \$30.00 on a first come basis. Please call the Church Office in advance to check availability. (352-357-2833) Sibling Discount: \$5.00/sibling

## Fees:

- Enrollment Fee is \$50.00 Non-Refundable, Paid at time of Enrollment.
- Material Fee of \$75 paid bi-annually, non-refundable.
  - Due January 1st/July 1st for total of \$150/year
- Monthly Tuition: due on the 1<sup>st</sup> of each month. (Late fee of \$25 after 10th of the month)
  \*\*\*Please note that fees are not refunded if your child is absent.

## Morning Snack:

MMO provides each child with a healthy mid-morning snack and drink. Please let us know if your child has any food or drink allergies or restrictions.

## Other Items:

Each child must bring a backpack that contains a full change of clothes and diapers if not potty- trained. Please label backpack with child's name.

# Well Child Policy:

We are committed to maintaining a sanitized facility to prevent the spread of disease. We ask that you follow the following guidelines.

Your child **MUST** stay home if he/she:

- has a fever of 100.0 currently or within the last 24 hours.
- is vomiting or has diarrhea currently or within the last 24 hours.
- has a runny nose with thick, yellow or green discharge.
- has a severe, persistent cough.
- has unexplained rashes or skin infections/conditions.
- has an eye infection of any kind.
- has any contagious childhood disease such as chicken pox, measles, etc.
- has head lice.

If your child has any of the above symptoms or if you are in doubt, we ask that you please keep your child home. If your child develops any of these symptoms while in our care, the parent will be asked to promptly pick up him/her.

### **Discipline Policy:**

The best discipline plan includes having age appropriate activities that engage the child with planned transitional procedures. However, all children go through time periods where they are unhappy or need to be corrected. It is our policy to first help or ask the child to correct his/ her behavior or situation. If this is unsuccessful, the child will be redirected to another activity. Next, if the undesirable activity continues, the child will take a break from the other children. If the behavior persists and you are needed, you will be notified by cell phone.

We will not tolerate violence of any kind in Mom's Morning Out. If your child bites, hits or kicks another child, we will write up an incident report and you will be notified. The parent of the other child will also be notified. We realize that some children go through this phase, and we are sympathetic. However if the inappropriate behavior persists, we will ask that the child not attend Mom's Morning Out until he/she matures beyond the aggressive phase and the behavior has stopped.

### Contact Us:

Please contact the Church Office with any questions or concerns regarding your child: 352-357-2833 or office@fpceustis.com.

As parent or legal guardian of \_\_\_\_\_\_, I agree with the Policies of Mom's Morning Out as stated above.

\_\_\_\_\_

Date \_\_\_\_\_

Signature of Parent or Legal Guardian

### FIRST PRESBYTERIAN CHURCH EUSTIS

Mom's Morning Out - Photograph Release Form

I hereby grant and authorize First Presbyterian Church of Eustis, Florida the right to take, edit, copy, exhibit, publish, distribute and make use of any and all pictures or video taken of my child to be used in and/or for legally promotional materials including, but not limited to, newsletters, flyers, posters, brochures, advertisements, fundraising letters, annual reports, press kits and submissions to journalist, website, social networking sites and other print and digital communications, without payment or any other compensation or consideration. This authorization extends to all languages, media, formats and markets now known or hereafter devised. This authorization and release form shall continue indefinitely, unless I otherwise revoke said authorization in writing to First Presbyterian Church of Eustis, Florida. I understand and agree that these materials shall become the property of First Presbyterian Church of Eustis, Florida and its organizations and representatives.

l accept,	I decline,

Date: \_\_\_\_\_\_ Relationship to the Child \_\_\_\_\_