

BUILDING BLOCKS CO-OPERATIVE NURSERY SCHOOL

- SINCE 1976 -



Dear Parents/Guardians,

Welcome or welcome back to Building Blocks Co-operative Nursery School. There are two primary purposes of the school:

- 1. To help each child develop physically, cognitively, emotionally, and socially through play and interaction.
- To help parents learn more about child development and child guidance techniques through parent meetings, parent education, and participation in the program under a qualified teacher.

Building Blocks Co-operative Nursery School is a non-profit sectarian organization, operated and administered by parents for their children. The success of a cooperative school is determined by the quality of staff and by the hard work, enthusiasm, and cooperation of all parents.

The teachers are responsible for the program, the teaching practices, and the health and safety measures. The Board of Directors manages the business operation of the school, sets fees, and oversees its administration according to the by-laws and the Ministry of Education. But the school belongs to you, the parents. You are expected to assume your share of the responsibility for its smooth operation. An annual general meeting is held before the start of the school year and attendance by all parents is expected. Your active participation will contribute significantly to the success of the school.

We hope that you and your children will share in the enjoyment of this beautiful experience and that the happy, nurturing environment at Building Blocks will help each child realize their potential as an independent, mature and productive individual.

Thank you for choosing Building Blocks Co-operative Nursery School!

Sincerely,

The Board of Directors, Building Blocks

GENERAL INFORMATION

Location:

Building Blocks Co-operative Nursery School 91 Doran Road, Midhurst ON L9X 0L5 (lower level of Midhurst United Church)

Phone: 705-722-1078

Email: bbnsmidhurst@gmail.com

School Year:

The school year runs from September to the end of June. We follow the same holiday calendar as SCDSB. Building Blocks remains open on PD Days.

Hours of School:

9:00 am - 12:00 pm

Children may be picked up after 11:45 am, but no later than 12:00 pm. If someone other than a parent/guardian is picking up a child, please notify a teacher.

Age of Enrolment:

Students must be 30 months of age by the beginning of September. Building Blocks is able to accept a maximum of 20% of 24-30 months old (based on full enrolment).

Payment of Fees:

Building Blocks is a part of the Canada-wide Early Learning and Child Care (CWELCC) program. CWELCC is initiated and funded by the Government of Canada. CWELCC is a five-year plan to reduce the cost of child care to an average of \$10 per day by 2026.

Monthly tuition is to be paid to the Treasurer by a series of post-dated cheques or e-transfer. Cheques are due on the first day of school. NSF cheques are subject to a \$25.00 penalty, plus any applicable bank charges.

E-transfers are subject to a \$1.25 admin fee to be included in each monthly payment. First and last months tuition is due by the first day of school.

Waitlist:

- 1. If all spots within the nursery school are filled, the child's name will be put on a waiting list.
- 2. As spots become available, families will be contacted first:
 - a) those who have siblings currently at Building Blocks AND
 - b) those who want to enroll their child in the available spot immediately (ie: not three months from now). AND
 - c) those whose names are on top of the list (i.e. have been waiting for the longest) AND
 - d) those whose child meets age eligibility requirements
- 3. Families will be notified of an available spot at least four weeks before the proposed start date. When contacted, families have one week to respond that they will enroll their child on this date. If they do not respond positively, the spot may be given to the next child on the wait list who meets the criteria in #2 above.
- 4. If requested, the wait list (containing only the first names and last initials of the children waiting) will be accessible to the parents waiting.

Choice of Program:

TWO-DAY PROGRAM:

Monday and Wednesday *OR* Tuesday and Thursday **\$96.00 per month**

FOUR-DAY PROGRAM:

Monday, Tuesday, Wednesday, and Thursday **\$192.00 per month**

Snacks:

Snack will be provided for the students. Snacks are not a meal, but usually include two food groups from Canada's Food Guide.

Parent Resource:

Parents/guardians are encouraged to contribute their talents to the program - e.g. storytelling, puppetry, baking, music, etc. Please discuss any ideas that you may have with a teacher, so a suitable time can be arranged.

Field Trips:

Parents/guardians will be notified in advance of each field trip. A parent/ guardian must accompany their child. Siblings are welcome. Additional fees may be necessary for various trips. Necessary fees will be approved at general meetings.

Clothing:

Please dress your child in washable, comfortable play clothes. All clothing and belongings should be labeled. Indoor shoes or slippers should have rubber soles. It's advised that a set of backup clothes be supplied in the case of an accident or spill.

Inclement Weather:

Building Blocks Nursery School closes in the event of inclement weather and our teachers are unable to make it to school, or if the SCDSB closes public schools. The Board of Directors will send an email the morning of a closure, as well as announce it on the Building Blocks Facebook & Instagram pages.

Illness of Child:

If there is any question of illness, do not send your child to school. Whenever possible, notify the teacher of the reason for your child's absence. If a communicable disease is contracted please be sure to notify the teacher so that this can be reported to the Medical Officer of Health as soon as possible.

Medications:

Building Blocks will NOT administer any prescribed medications, except emergency medications such as an epi-pen or inhaler.

Progress of Child:

If you have any questions or concerns about your child's progress or the program, please direct these to the teachers. Also, try to inform the teachers of any event or change in routine at home which may affect your child's classroom behavior. Parent/teacher meetings can be arranged on request.

Withdrawal:

If it becomes necessary to withdraw your child from Building Blocks, please notify the Board of Directors/Registrar in writing one month in advance. Unused cheques will be returned. When a child cannot cope in the program, parents/guardians will be notified. If the situation cannot be resolved, it will be brought to the Board. If the collaborative efforts of the family, teachers, Board, and other services (if appropriate) fail and the suggested steps to alleviate the problem are not successful, the child may not be able to continue in the program.

STUDENT REGISTRATION Child Information

Admission Date	Child Information	Withdrawal Date		
Full Legal Name:		Preferred Name:		
Home Address:	Birth	date:		
Siblings Names:	Lang	Languages spoken at home:		
Doctor's Name/Phone/Address:	·			
Health Card Number:	Medical Conditions	lical Conditions/Allergies:		
	Guardian Information			
Full Legal Name:	Preferred Name	Preferred Name:		
Relationship to Child:	Primary Phone	Primary Phone Number:		
Home Address:□ Same as Child	Email address(Email address(es):		
Full Legal Name:	Preferred Name	Preferred Name:		
Relationship to Child:	Primary Phone	Primary Phone Number:		
Home Address:□ Same as Child	Email address(Email address(es):		
In the event of an EMERGENCY, we will	 attempt to reach the parents/gu	ardians first and then emergency contact		
Emergency Contact (phone number and relationship to the child)				
Additional Authorized Pickups (name and phone number)				

CUSTODY ARRANGEMENTS (if applicable)

Are there custody arrangements pertaining to legal right of access to your child? YES NO

If YES, please provide a copy of the appropriate legal documentation (e.g., court order).

CustodialParents	

HEALTH INFORMATION History of Communicable Diseases (Nature and Dates): Is your child in diapers? YES NO If no, my child: Uses the washroom independently Requires assistance Requires full support Please provide details, if necessary: Does your child require any additional support with respect to physical activity? YES NO If yes, please provide relevant details:

ADDITIONAL INFORMATION

Please indicate any additional information which is relevant to the care of your child (e.g., medical, behavioural, dietary, speech, etc.):

ANAPHYLACTIC ALLERGIES

Does your child have a life-threatening allergy (e.g., anaphylactic to peanuts or bee stings)?

YES NO

If yes, an individualized plan for an anaphylactic allergy that includes emergency procedures must be developed between the parent and Building Blocks prior to the child's start date.

Does your child have any allergies that are not life-threatening (food or other substance (e.g., latex))?

YES NO

If yes, please provide relevant details, including what your child is allergic to, symptoms of a reaction and treatment:

There are children at Building Blocks who have severe allergies which can cause an anaphylactic reaction. An anaphylactic reaction is an allergic reaction so severe it can cause death. Nuts and peanuts are a common trigger for anaphylaxis. As a result, Building Blocks does not permit nuts, peanuts, or nut/peanut products to be brought into our centre.

If your child is entering the centre after recently eating peanut butter or other such products, please ensure that hands are thoroughly washed and teeth are brushed. A peanut/nut allergy can be so severe that even touching or inhaling a trace amount can trigger a life threatening reaction.

CONSENT FORMS

#1. Field Trips & Outings

During the school year, there will be field trips pl be notified in advance for each proposed trip. Pa requested. Offsite field trips a guardian must atte	arent/guardian permission for these trips is				
As a parent/guardian, I hereby consent to (stude participating in properly supervised field trips, ex	· ————————————————————————————————————				
Signature:	Date:				
#2. Eme	<u>rgencies</u>				
If an emergency such as an accident, or sudder School, every effort will be made to contact the parent/guardian can't be reached, prior consent	parents/guardians first. However, if a				
I hereby consent to have my child (student name taken to the hospital, examined by a doctor, and accident, sudden illness or another emergency reached.					
Signature:	Date:				
#3. Hand	Sanitizer				
I consent to (student name) the supervision of a staff member. Hand sanitizing	using hand sanitizer under ng products aren't left accessible to children.				
Signature:	Date:				
#4. Fundrai	sing Efforts				
Throughout the school year Building Blocks runs towards purchasing classroom supplies, new retrip admissions. Examples of fundraisers throug Day Flowers, Mabel's Labels, Scholastic.	sources and equipment for the school, and field				
I hereby acknowledge the information above, pe	ertaining to Building Blocks's fundraising efforts.				
Signature of Parent/Guardian:	Date:				

#5. Photographic Permissions

Complete all <u>applicable</u> sections.	
a) I agree to the use of photographs and/or footage of myself during Building Blocks Nursery School activities include printed promotional material, the Building Bloc research, or broadcasts.	s for publicity purposes. Publicity may
Signature of Parent/Guardian:	Date:
b) I agree to the use of photographs and/or footage of and/or myself for use within the school (e.g. to be post	•
Signature of Parent/Guardian:	Date:
c) I agree to the use of photographs and/or footage of and/or myself to be posted on the Building Blocks Onli for current families only) and/or to be given to me direct activities and progress. Signature of Parent/Guardian:	ne Classroom (<i>private Facebook group</i> , ctly in order to demonstrate my child's
#6. Cooperative Respe	<u>onsibilities</u>
All Building Blocks families are expected to assume the for the school's operation. Examples of co-operative real Annual General Meeting, seasonal yard clean up days maintenance, Costco runs, disinfecting toys, carpet clear participate in the classroom. Proper documentation multimunization records and review of school policies), put hereby acknowledge the information above and agreement of the school policies.	esponsibilities include attending the s, laundering, snow removal, general eaning, etc. Parents are welcomed to ust be submitted (police check, rior to participating in the classroom.
responsibilities.	e to participate in the co-operative
Signature of Parent/Guardian:	Date:



Child Care Immunization History For All Day Child Care

Child Information								
(Please check)								
☐ I have uploaded a current copy of my child's immunization record to								
www.simcoemuskokahealth.org/immsonline								
☐ I have attached a current copy of my child's immunization record to this form which will be retained								
at the child care centre								
□ I have completed the following form at the time of child care registration								
Child's Legal Surname		Other Surnames (if any)						
Legal First Name	Legal First Name		Preferred Name					
Date of Birth			Ontario Health Card Number					
Legal Parent / Guardian			Legal Parent / Guardian					
Preferred Mailing Address	Preferred Mailing Address		Alternate Mailing Address					
Ŭ								
City		City						
Postal Code			Postal Code					
Preferred Phone		(circle one)	Preferred Phone		(circle one)			
		(on the trie)			(on old only)			
Home (Cell	Work	Home	Cell	Work			
Alternate		(circle one)	Alternate		(circle one)			
Home (Cell	Work	Home	Cell	Work			
Current Preschool / Child Care								
Previous Preschool / Child Care								

When your child receives their next immunization(s), provide this information to the child care centre and call the health unit or complete the secure electronic form on our website at www.simcoemuskokahealth.org/immsonline to update their immunization record in our database. Immunization records and updates are NOT automatically provided by your doctor.

The Simcoe Muskoka District Health Unit is required by the *Child Care and Early Years Act, R.R.O. 2014 Reg. 137/15 s. 35* to collect and maintain up-to-date records of immunization for every child enrolled in a program. Children are to be immunized complete for their age in accordance with the current Publicly Funded Immunization Schedule for Ontario.

If you choose not to immunize your child, please contact the health unit for more information at 705-721-7520 or 1-877-721-7520 ext. 8827.

This information is collected under the authority of the Health Protection and Promotion Act R.S.O 1990 c.H.7., s.4 and the Child Care and Early Years Act, S.O. 2014 O Reg.137/15, Part II, S. 35. The personal health information collected on this form will be used to maintain immunization records and to monitor the use of vaccines for public health purposes. Questions regarding the collection and use of personal health information should be directed to the Office of the Privacy Officer, Simcoe Muskoka District Health Unit, 15 Sperling Drive, Barrie ON L4M 6K9, 705-721-7520 or 1-877-721-7520.

Registration Package Checklist:

- Print and complete Registration Package
- Student's Immunization Record required prior to the first day of school.
- Tuition Payments Series of post-dated cheques, dated for the 1st of each month or e-transfer (\$1.25 admin fee)