

Rama Sega NAM

19578 Ficher Avenue

Poolesville, MD 20837

Cell number : **404-808-6676**

Phone number : **301-585-1819**

**Contract**

1) Child’s Name D.O.B. - - Age

Parent/Guardian (1) Name Home Address Employer Preferred Email Work Phone # - - Home/Cell Phone #

Parent/Guardian (2) Name Home Address Employer Preferred Email Work Phone # - - Home/Cell Phone #

Emergency Contact #1 Phone number #1

Emergency Contact #2

Phone number #2

**Days and Hours of Services**

**Tuition Rates**

**Full Time (Paid Weekly) (4+ days a week)**

Infants/Toddler $ 380

Preschool $ 350

Kindergarten – 12yrs old $ 300

# Part Time (3 days or less)

Per Day

4 – 6 hours $

8 –10 hours $

Additional hour $

# Sibling Rate

1st 75% of age rate

2nd 50% of age rate

3rd and more 25% of age rate

Tuition is due Friday for the following week. If payment is not received by the due date, a late fee of $ 10 is applied for EACH DAY that the payment is not received until payment is made in full or until suspension occurs. Suspension occurs 1 week after late payment was due.

Initial

# Hours, Rates, and Payment Policies Hours

The program operates from 7.30 am to 5.30pm. Monday through Friday. Extension of care hours may

require additional fees. No extension arrangements will be made after closes on Friday.

# Late pick up fees

Late fees are charged as follows:

* $1 per minute Initials

You will be charged late pickup fees any time your child is picked up after the pickup time of 5.30 pm or any time after your agreed pick-up time as indicated in the **Days and Hours of Services** section.

Initials

# Tuition Payment

Your tuition fee of $ is payable the Friday before the week of care (payment in advance). Payments received after the due date will be considered late and will be charged a late fee. It is the parent’s responsibility to make on time payments, regardless of the child’s attendance. In the event of scheduled vacation, you are required to pay your tuition prior to the absence.

Initials

# Late Payment Fees

A late payment fee will be added each week that payment is late for the first two (2) weeks. After that, suspension of care occurs. If payment is still not made in 1 week after suspension of care, then termination will occur. During suspension the parent is responsible for holding the child spot. The child's tuition fee will be charged each week of suspension till termination. At termination the fee of

$100 will be added and must be paid within 30 days or the issue will be escalated to court. The parent/Guardian is responsible for court costs incurred as well.

Initials

# Methods of Payment

You may pay by Zelle, cash or check. If your bank returns a check for any reason, I will notify you and request payment in cash. A $30.00 charge will be added for any returned checks along with any other additional fees (late fees). After 2 returned checks I will only accept cash, Zelle.

# Full – time/Part - time

Day care fees are charged on a weekly basis. Each family is required to pay the weekly fee **whetheryour child is in attendance**. If your child is holding a full-time spot then, the bill will be the full-time price regardless of absences unless prior planned. This weekly fee ensures that your child’s spot is reserved in my program. If the program is open for only part of the week due to holidays, the full weekly rate will be charged. I will require 2 – week written notice for any schedule changes. Scheduled changes could include but are not limited to:

* Vacations
* Changing tuition rate (full-time to part-time and the reverse) (part-time slots are not always available).

Initials

# Drop – In Care

Drop-in care is limited, subject to availability, and booked on a first come first serve basis. Drop-in care fees are charged daily. A drop-in care fee is charged regardless of attendance unless 24hr cancellation notice is provided. Drop-in care fees are as follows:

* Up to 8 hours $ Up to 12 hours $XX Initials

# Closed Holidays

The following are **PAID** holidays:

* New Year's Day,
* Martin Lutter King Day
* Washington’s Birthday
* Memorial Day,
* Juneteenth National Independence
* Independence Day (July 4th)
* Labor Day
* Thanksgiving Day
* Christmas Day

The Bambi Family Childcare Program will be closed these holidays if the holiday falls on a weekday.

# Provider’s Vacation, Sick Leave and personal days

The provider has 3 Bereavement/Emergency Day within a 12-month period. In addition, the provider has 5 Vacation Days per year. The full tuition rate will be charged when vacation days are used. A prior 2 – week notice will be given for any planned vacations. The provider also has 5 Personal/Sick days to use during the year. Full tuition will be charged when personal days are used. Notice will be given as soon as possible when using personal days. Any closures outside of these days will be discounted from the tuition as needed.

# Children’s late arrival, sick leave and vacation

If your child is ill and will not be in attendance for the day, I require that you notify me by 7am the latest. I plan the day’s activities and meals around the drop off and pick up times of the children. I also require that you notify me if a child will be arriving late, for any reason.

# Vacation

Please provide a 1-week in advance written notice is required anytime you child will be out of my care for an extended time, such as vacations. Compliance with this notification for vacation will result in 50% of the tuition being reduced.

If your child is absent due to illness, the full tuition rate is still due.

# Termination of Care Trial period termination

There will be a 2 – week trial period (10 working days) for each child, during which time either the parents or the provider may void this contract, with a written request. Termination will be granted the day the written request is received. No refunds will be issued on paid tuition.

Initials

# Termination of contract

If for any reason you decide to stop bringing your child after the trial period, I will require a 2 - week (14 day) written notice and final payment. Final payment is due when termination notice is given. Your termination notice will not be valid until final payment has been received and tuition will be billed as

normal until both the notice and payment is received. This payment is to be paid whether or not, your child is brought to daycare for the entire notice period. Any outstanding fees must be paid in full within 30 days.

* If I terminate your child’s contract for care due to non-payment, a fee of ….. $ per child will be added to your unpaid balance for non-compliance with contract.
* If I need to terminate this contract of care for your child for any reason, I will give you 2 – week written notice. Examples of why I would terminate your child’s care include but may not be limited to:
	+ Failure of the parent to pay tuition on time.
	+ Failure to complete required forms
	+ Failure to follow the established policies
	+ Lack of parental cooperation.
	+ Difficulty of the child to adjust to the center
	+ The needs of the child will be sufficed in a more appropriate way in another environment



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***Family Handbook***

***Welcome***

Thank you for choosing Bambi Family Child Care Program

**Mission Statement:** In Bambi Family Child Care Prio Program I strive to provide a safe, nurturing, engaging and inclusive environment for children of all abilities. I work with children and families through a responsive early childhood education program to support the unique strengths and respond to the needs of each child under my care. I embrace learning through social play and positive interactions that can naturally promote child development and foster children’s social, physical, emotional and cognitive skills.

# Our family childcare program goals

* + Individualized care responsive to the age, developmental needs, abilities, and interests of each child
	+ Consistent and age-appropriate interactions and routines
	+ Activities to meet the developmental and educational needs of each child including children with disabilities and special health care needs
	+ Developmentally and age-appropriate learning and play time with appropriate activities, materials and toys
	+ Respectful and engaging environment and interactions to nurture self-confidence and social skills
	+ Provide a safe and healthy environment for the children while attending our program

# Enrollment procedure

Before enrolling your child in my program, we will schedule a parent interview. The parents and child can visit my program to ensure it fits your needs. During the entry meeting, I go over the contract and all the policies with the families to ensure a mutual understanding.

All required enrollment forms need to be completed and signed before the child begin attending the program.

The required enrollment forms are:

* Emergency Form with emergency contact information
* Health inventory completed by a medical professional and the family
* Immunization record
* Lead test results (if applicable)
* Signed receipt of contract and handbook

# Family Child Care Registration

I am a registered family childcare provider regulated by the Office of Child Care in Montgomery County, MD. A copy of my current registration is posted on my bulletin board.

I am mandated to keep the children’s records and follow state -wide regulations called COMAR.

As a registered provider, I must provide all families with a copy of the “Parent’s Guide to Regulated/ Licensed Child Care”. An electronic copy of this guide can be found in here:

Parent's Guide to Regulated/Licensed Child Care

# Daily Schedule

 7am – 8:30 am: Arrival/Free play Learning areas (Smal group and individual learning opportunities)

 8:30 am-9:00am: Handwashing/Breakfast/Diapering and Toileting

 9:00am-10:00 am: Circle time and story time (Whole group)

 10:00am-10:15am. Snack

 10:15am-11:15am Activities in learning areas (Small group and individualized activities)

 11:15am-11:45am Outdoor activities (Whole group and one on one time)

 11:45am-12:00pm Handwashing (Transition)

 12:00am-12:30pm: Lunch time/Conversation time (Whole group)

 12:30pm-12:45pm: Handwashing/Toothbrushing/ Toileting and diapering (Transition)

 12:45pm-2:30pm: Naptime / Cleaning up and bathroom (Transition)

 2:30pm-3:00pm Snack time /Conversation time (Whole group)

 3:00pm-4:00pm: Outside play/Art/Music (Small group and whole group)

 4:00pm-5:30pm: Free play Learning Areas (Small group and Individual learning opportunities)

 5:30pm-6:00pm: Clean Up/Free Time/Dismissal

This schedule is flexible to meet the needs of each child including children with disabilities and special health care needs. Transitions from one activity to another include songs, games and visual cues. Infants and young toddlers follow their own schedule for napping, diapering and feeding.

# Family communication and Conferences

I communicate with family daily during arrival and pick-up. We can also communicate through text, phone call and email.

However, I do conduct formal conferences with each family twice a year (in the winter and the spring) to discuss how your child is learning and to review their progress.

I will inform you about the conference dates by posting a reminder on my bulletin board and communicating verbally when it is time for your child’s conference. Please choose a day and time that works for you. You can let me know during arrival or pick up time or by writing your name in the sign-up sheet. I will put out a sign-up sheet a week before family conferences. If you have a concern, please let me know and we will arrange a time to talk.

# Curriculum

I prepare weekly lesson plans that include the activities that I will be completing with the children. To direct my lesson planning, I use two resources:

1. Health Beginnings for children from Birth to age 36 months

Healthy Beginnings | Division of Early Childhood (marylandpublicschools.org)

1. Maryland Early Learning Standards for children ages 3 to 8 years old

Maryland Early Learning Standards | Division of Early Childhood (marylandpublicschools.org)

# Child Observations and assessment of development

I observe the development of children on regular basis. This helps me to plan activities and to identify any areas of development that require additional support from my part.

Within the first 60 days of your child attending the program, I will complete a developmental checklist using the Center for Disease Control Milestone Checklist

CDC’s Developmental Milestones | CDC

I continue observing children using these developmental checklists every 3 months. I keep a folder for each child with samples of their work and anecdotal records.

I share this information during family conferences, and we can develop a plan to support your child’s

development based on the results.

# Inclement Weather Policy

We follow Montgomery County Public School schedule. Any time MCPS are closed or delayed due to inclement weather, we will be open by no later than 8am. You are welcome to come earlier at your own risk. This gives me time to clear sidewalks and stairs of snow and/or ice, and prepare a safe area for families to arrive. This also gives time for the streets to be plowed and cleared. Please make sure to pay attention to your local news for school closing information, or feel free to call me.

# Health Policy/ Illness

If your child is feverish or has thrown-up, you must keep him/her at home. I require the child to be symptom free without medication for 24 hours. Medicating your child to hide his/her symptoms so they can attend childcare can/will result in termination of child care services. If I feel that it is necessary for

the parent to be contacted due to an illness of your child, the parent must pick-up the child within a reasonable amount of time. Listed below are signs of illness:

* Temp of 100° or more
* Nausea or vomiting
* Stomachache
* Diarrhea
* Pale or flushed face
* Headache
* Persistent cough
* Earache
* Thick yellow/brown/green discharge from the nose
* Painful sore throat
* Rash or infection of the skin
* Red or Pink eyes
* Discharge from eyes
* Loss of appetite
* Loss of energy or a decrease in activity

# Exclusion from Care

A child may be excluded from care if:

1. The child’s illness prevents the child from participating comfortably in activities that the facility

routinely offers for well children or mildly ill children.

1. The child is displaying any of the signs and symptoms that require an evaluation from a health care provider as indicated by the child’s age and condition. In this situation the parent is notified of the need for immediate emergent or urgent issues.
2. The illness requires more care than the childcare staff is able to provide without compromising the needs of the other children in the group.
3. The child exhibits an acute change in behavior, and examples include lethargy/lack of responsiveness, irritability, persistent crying, difficult breathing, or having a quickly spreading rash
4. The child with fever: Temperature at or above 100.0◦ F orally, 101 ◦ F rectally or temporally

(Temporal Artery Forehead scan), or 99.5◦ F axillary (armpit). Exclusion due to fever should be based on disease-specific guidelines or other clinical guidance from the child’s health care provider.

1. The child with Diarrhea: Loose or watery stools of increased frequency that is not associated with change in diet. Stools that is not able to be contained by a diaper or be controlled /contained by usual toileting practices. Exclude until diarrhea has resolved and child is diarrhea-free for at least 24 hours; or until cleared by medical provider.
2. The child with Vomiting: Two or more episodes of vomiting in a 24-hour period. The child should be excluded until vomiting resolves or until a health care provider clears for return.
3. The child mouth sores with drooling unless the child’s primary care provider or local health

department authority states that the child is noninfectious.

1. The child with rash with fever or behavioral changes, until the primary care provider has determined that the illness is not an infectious disease.
2. The child with Impetigo/Scabies, until treatment has been started.
3. The Child with Hand, Foot and Mouth Disease: Fever, uncontrollable “hand to mouth” behavior, not able to contain their secretions, such as ulcers in the mouth and the child is drooling, or draining sores that cannot be covered.

These are regulations as stated in the document Child Care Guidance for Illness, infections, Exclusions and Reportable/Notifiable Conditions Prevention and Reporting by Maryland State Department of Education.

If any of the above symptoms persist, you will be contacted and required to pick up your child. Your child may need a doctor’s note to re-enter. Please understand that this is for the health and safety of all the children in care and the provider and other adults.

# Medication Administration Policy

As part of my preparation as a childcare provider, I received training in Medication Administration. Before administering any prescription or non-prescription medication, I need to receive a completed, signed and dated medication authorization form completed by the child’s parent/guardian and a licensed health practitioner approving the administration of the medication and the medication dosage. A copy of the signed form will be kept in the child’s records.

Also, the parent must have given the first dose of the medication to the child to be sure that the child will not have an adverse reaction.

If medication is by prescription, it shall be labeled by the pharmacy or physician with:

1. The child's name; b) The date of the prescription; (c) The name of the medication; (d) The medication dosage; (e) The administration schedule; (f) The administration route; (g) If applicable, special instructions, such as "take with food"; and (h) The duration of the prescription; and (i) An expiration date that states when the medication is no longer useable.

The parent/guardian must provide a completed and signed consent for the application of diaper rash product, sunscreen, or insect repellent.

# Physical fitness and Outdoor Play

We have one morning and one afternoon outdoor time every day weather permitted. Please dress your child appropriately for the current weather, and in play clothes as we may get dirty. We require closed- toes shoes, no flip-flops or sandals please. Children will be using outdoor toys and equipment such as balls, riding toys, hula hoops, jumping ropes, etc.

While the provider will provide age-appropriate supervision and enforce safe play, children might have accidents. The provider cannot accept liability when a child is injured. By signing this contract, the provider is released from any liability due to regular play during childcare hours.

Initials

# Injuries and Other Emergencies

All minor cuts and abrasions will receive proper care. By regulations, I need to have a CPR-First Aid current certification and will follow the required procedures.

I will complete an accident report and the incident and treatment provided will be logged. I will inform you of the injury.

I am required to do a daily check of the children upon arrival and I will log any injuries I observe on your child while in my care which have occurred outside of my care.

If a medical emergency arises, I will attempt to contact a parent/guardian first, unless doing so endangers the child’s life. In that case I will take the necessary steps, putting the child first (calling the hospital, doctor, poison control, etc.) If a parent/guardian is unable to be reached, I will contact the Emergency contacts listed in your enrollment form.

# Safety Policy

As part of my training as a registered family childcare provider, I am trained in CPR-First Aid and Emergency and Disaster Preparedness. My program has an Emergency Preparedness plan with information about steps to complete during an emergency and evacuation plans.

Montgomery County Department of Permitting Servicesconducts a fire code compliance inspection every two years. We conduct monthly fire drills and evacuation drills twice a year and I keep a log of all my drills.

Emergency escape plans are posted in the areas used for childcare. In case of an emergency on which we need to leave the house, our meeting place is at the XXXX.

# Substitute Information

I have an authorized substitute by the Office of Child Care. If I need to be absent during the

day or become unable to supervise the children during the day for any reason, only my authorized substitute will be in charge. Only substitutes approved by the Office of Child Care will be in contact with the children.

If for any reason I am unable to locate my substitute, I will contact you, and you will need to plan to pick your child up accordingly.

# Dismissal Procedures-Releasing Your Child

I will only release a child to his/her parent/guardian, the designated persons in the Emergency Form.

If someone other than the above mentioned is to pick up the child, please notify me ahead of time. If the person is not on the list of approval emergency contacts or adults authorized to pick up the child, I must have written permission to release your child. Anyone who picks up your child will need to show me a photo I.D.

If you (parent) or an authorized adult seems incapacitated (under the influence of alcohol or drugs) to safely pick up a child from my program, I will not release the child.

You and anyone transporting your child must have an age-appropriate car seat.

# Supplies provided by the family

Parents are required to provide disposable diapers and wipes for their child. It is also required you send a change of weather appropriate clothing for your child. You will be notified when your supply is running low. I may request special supplies (for projects). I will send home a special request form for you at that time.

# Transportation Policy

I/We give consent for my Child Care Provider to transport my child in his/her car in case of emergencies. The provider will use car seats and seat belts as required by Maryland law. Provider will provide notification/permission slip prior to transporting my child, except for emergencies, in which case the provider will notify as soon as possible.

Initials

# Nutrition and food services

I provide healthy and nutritious snacks that include milk, fresh fruits and vegetables, protein and whole grains. I provide 2 snacks a day. The weekly menu is posted on my bulletin board. All snacks served to the children are low in sugar; fat and salt reduced and whole grains.

I encourage families to send their child with nutritious meals. I will monitor to make sure all meals are nutritious, and I will supplement as needed to ensure children are receiving meals that meet their nutritional needs.

# Sleep and Rest

A daily rest period will be scheduled for one hour minimum after lunch. Children will rest on individual coats provided by our program. Linens will be provided.

# Sleep arrangements for infants

Infants under 12 months will nap in their cribs. Infants and young toddlers follow their own schedule for napping. I monitor at least every 15 minutes and I use a baby monitor while the children are sleeping. No soft bedding items will be placed in the crib including but not limited to pillows, quilts, comforters, and crib bumpers. All infants will be placed on their backs when sleeping. Any infant who falls asleep in a furnishing other than a crib will be immediately moved to the crib.

We will provide all linens. Please do not set in blankets.

# Toys

Bambi Family Daycare is not responsible for your personal toys or any other items brought from outside.

Please leave any toys from home in your child’s cubby upon arrival.

Initials

# Pets

***CACERB01***

*2025-06-04 14:09:08*

-------------------------------------------- DAP 3

***CACERB01***

*2025-06-04 14:09:16*

-------------------------------------------- ADM 7

We do not have Pets in our home.

# Positive Discipline Policy

I provide choices throughout the day to the children to help them make their own decisions and provide a sense of independence. Choices may include but are not limited to children choosing learning areas; toys and materials to use; play partners; activities during our daily routines.

I set clear, simple, and consistent rules to help the children understand acceptable behaviors. The children and I have conversations about the rules, and they participate with ideas and input whendeveloping these rules.

I reinforce positive behavior and respect by talking with a soft and calm voice. I use positive communication (for example by saying “We Walk inside” instead of “Do not run”) and I come close to the child and down to the child’s levelwhen talking to them. I recognize and reinforce children’s appropriate behaviors by labeling their actions and repeating what they say and do in a positive way.

Children are encouraged to have conversations and express how they feel when conflicts with their friends arise. They do reflect on how they and their friends feel and together they can agree on a solution to the situation.

If a child is displaying a challenging behavior, I redirect his/her attention to other activities, friends, materials or learning areas. I encourage children to reflect on their own behaviors and the impact on others. I encourage them to solve their problems by showing empathy to others and having a conversation among friends.

Initials

# Non-discrimination and Inclusion Policy

We include families and children regardless of race, color, sex, age, national origin, religion, language, disability, or special health care need. My program welcomes all children including children with disabilities and special health care needs. All children will be included in all program activities and activities will be adapted to respond to the children needs. I am willing to make accommodations to adequately care for your child/children and collaborate along with your family and early intervention specialists. My home is open for early interventionists to come to the house and observe the child and provide services according with their IFSP/IEP upon your consent.

If your child has an IFSP or IEP, please provide a copy of it. This will help me to be familiar with your child’s

needs and plan activities accordingly. This is voluntary and it is not conditional for enrollment.

Does the child have an IFSP/IEP? Yes No

Are you voluntarily willing to provide a copy? Yes, No,

# Screen Time Statement: Use of electronic devices

I am dedicated to the development and well-being of children. It is my intent to provide the children with many opportunities to move, investigate and explore the world around them with hands-on learning activities while in care.

Screen time means any time that a child is in front of a screen device such as television, computer, laptop, tablet, video games or telephone.

I am engaged with children during the use of devices. I review the content of the program with them, and we discuss how we can use this information. The use of devices is related to learning activities; therefore, the children and I share information before, during and after children use any device.

I follow the recommendations of the American Academy of Pediatrics (AAP) which include:

* 1. Children 2 years old and younger do not have access to any screen time.
	2. No more than 30 minutes per week of passive screen time for children two and older.
	3. All materials used are for educational purposes and aligned with the activities that I have in our lesson/daily activities plan.
	4. Screen time is related to engaged learning. I am engaged with the children by asking questions, moving with them, assisting the children to complete any tasks.
	5. I offer alternative activities to children who do not wish to participate in screen time.
	6. My program uses a timer system which limits how long the children are exposed to screen time .
	7. Devices are not used during meals.

# Handbook and contract Changes and Renewals

The contract and all information about your children and family is to be kept confidential.

The provider can amend any of the contract policies at any time during the year by providing the parent/guardians a copy of the new or changed policies at least 1 week before they go into effect. This contract is to be renewed by both parties every year during the month of January.

**SIGNATURE**

**By signing this contract and handbook, parent/guardians agree to abide by the written terms and policies of the provider.**

**I/we certify that we have read, understand and agree to abide by the written policies of this Parent Handbook. I confirm that I received a copy of the contract and handbook upon enrollment.**

Parent/Guardian (1) Name and Signature

Parent/Guardian (2) Name and Signature

Date: Date:

Provider

Name and Signature

Date: