



## Preschool Camp Sessions and Timings

Session one (half day)- 9.00 to 12.00pm

Session two (full day)- 9.00 to 3.00pm

### **DAILY SCHEDULE**

(Activities may vary according to the theme for the week)

**Please Sign in and Sign out your child at drop-offs and pick-ups**

#### **Half-Day Session Morning Option 9.00am to 12.00pm**

9.00-9.10am - Welcome, Sign In, Meet and Greet

9.10-9.30am - Namaste, Songs, Book of the Day

9.30-10.00am - Choice Time / Learning Centers

10.00-10.10am - Clean up, Bathroom Break, Wash Hands

10.10-10.45am- Snack and Outside play time

10.45-11.15am - Activity for the Day/Free Art

11.15 to 11.45am - Circle Time

11.55-12.00- Half day dismissal

*\*Please Note-this option is only available if you have enrolled for a full day session*

*12.00 to 12.30pm -Lunch Time*

*12.30 to 1.00pm -Free Play*

*1.00 to 2.30pm-Nap time (Please inform the teacher if your child does not require a nap)*

1.00- 2.45pm- Choice Time (Few Structured activities will be offered at this time according to the age / development of the child) this will be made available to the children that do not nap.

2.45-3.00pm - Clean up, Full day dismissal

**3.00-6.00pm - AFTER CARE AVAILABLE FOR AN EXTRA CHARGE**

**A second snack will be provided during this time.**

## General Information

Please send in a change of clothes incase of any accidents (no shoes required)  
For safety reasons children must wear closed toe shoes with easy on and off straps. No laces, crocks, boots or flip-flops.

**Nap Time-** If you have signed up for a full day session your child might need to take a nap. This is not mandatory. If your child does not need to nap quiet activities will be provided during naptime.

## ITEMS NEEDED IF YOUR CHILD NEEDS A NAP

(The school will provide small child size beds)

- . A fitted crib sheet
- . A small pillow with pillowcase
- . A small blanket
- . A favorite snuggly toy/baby blanket

Please label all items clearly with your child's name. Bedding will be sent home once a week (on Fridays) to be laundered and should be brought back to school on the following Monday or the next school day.

**Snacks and Lunch-** A healthy and nutritious snack will be provided by the school daily. A snack can be sent from home incase of any specific food allergies that your child might have. No candy, cupcakes or chocolates please. **Parents are required to send a lunch to school** if their child is scheduled to be at school during lunchtime. The school does not provide hot lunches. Lunch boxes should be clearly labeled with your child's first and last name. Please include all utensils necessary for eating. We are unable to heat/microwave food for health and safety reasons. The school will provide 3 snacks daily (10.30am morning snack, 2.30pm afternoon snack and 4.30pm after care snack)

**Separation, support and transition-**Please express any concerns you may have regarding your child to the teachers. We are here to help make your child's first school experience positive and enriching. Each child has different needs during this time, so we will work closely with you to help them adjust better.

## Emergency Procedures

- 1) Immediate first aid will be given.
- 2) 911 will be called/your child will be taken to the nearest hospital, El Camino, and the recommendations of the paramedics will be followed.
- 3) Parents will be notified as soon as possible. If you are not available, other family or friends on your application form will be notified.
- 4) Parents are responsible for any expenses incurred as a result of emergency room care, ambulance, etc.

**PLEASE READ ALL OF THE INFORMATION BELOW.**

**\*Please fill out an application/emergency contact information form for your child on the first day of class. This is for any emergencies.**

**\*All fees must be paid in full in advance**

**\*All required documents should be completed and signed before the first day of your session. You will need to submit a current copy of your child's immunization record.**

**\*No refunds will be given for incomplete session or due to last minute cancellations from your side. A four-week advance notice is required for any refunds.**

**\*The spot will not be guaranteed unless fees are paid in advance. We are unable to switch your weeks around due to limited space.**

**\*The first 5mins after 12.00pm/3.00pm/6.00pm ie 12.05/3.05/6.05 respectively will be grace period after which there will be \$1 per minute late fee (depending on the program selected by you) charge added to your account (without prior notice)**

**\*Any absentees or missed sessions should be communicated to the staff by phone message or email. No make-ups for lost sessions will be provided.**

**[manasi@indiacc.org](mailto:manasi@indiacc.org)**

**ph- 408 934 1140 x226**



ICC PRESCHOOL SUMMER CAMP ADMISSION AGREEMENT

**Student Information**

Child's Full Name: \_\_\_\_\_

Child's Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Primary Language: \_\_\_\_\_

Is your child fully potty trained – Yes / No

Does your child require a nap – Yes / No

Food Allergies or other concerns (please list foods your child might be allergic to):

\_\_\_\_\_

\_\_\_\_\_ I am an Annual India Community Center Member

\_\_\_\_\_ I am not an India Community Center Member

Home Address: \_\_\_\_\_

**(These numbers will be contacted first incase of an emergency)**

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Name of Parents/Guardians

(Parent) \_\_\_\_\_

Email address: \_\_\_\_\_

(Parent) \_\_\_\_\_

Email address: \_\_\_\_\_

**(Other emergency contact numbers incase parents cannot be reached)**

1) Full name- \_\_\_\_\_ Ph- \_\_\_\_\_

2) Full name- \_\_\_\_\_ Ph- \_\_\_\_\_

3) Full name- \_\_\_\_\_ Ph- \_\_\_\_\_

**HEALTH HISTORY INFORMATION**

Physicians' Name: \_\_\_\_\_ Ph: \_\_\_\_\_

Dentist / Orthodontist's Name: \_\_\_\_\_ Ph: \_\_\_\_\_

Is the attendee covered by medical insurance? Yes \_\_\_\_\_ No \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Member Number: \_\_\_\_\_

Carrier Address: \_\_\_\_\_ Carrier's Phone: \_\_\_\_\_

Name of Insured: \_\_\_\_\_ Relation to attendee: \_\_\_\_\_

**\*Please turn in a copy of your child's updated immunization records**

**EMERGENCY MEDICAL TREATMENT:**

In the event of a medical emergency, every effort will be made to contact the parent/guardian of participants. If this is not possible, I hereby authorize ICC Preschool Staff to obtain medical treatment and I hereby give permission to ICC staff to secure and administer treatment and to maintain and/or release any medical records necessary for insurance purposes.

YES \_\_\_\_\_ (initial)

**INDEMNITY AND CONTRACT AGREEMENT**

Recognizing that ICC will do its best to ensure a safe experience, I understand that certain accidents may occur. I will not hold or attempt to hold ICC or its employees, staff or volunteers liable for any loss, damage or injury to person or property caused by any act or omission of ICC.

I verify that my child is in good health and is capable of participating in activities, and when necessary, will tailor his/her activities to those within the bounds of his/her physical health.

YES \_\_\_\_\_ (initial)

## MEDIA RELEASE

Occasionally, photos and video footage is taken during ICC's Preschool activities and used for promotional material. I authorize ICC to use photos/video taken of my child for use in brochures, articles, websites, and of other marketing purposes YES \_\_\_\_\_ (initial)

Participation in ICC Preschool activities constitutes permission to use photos of participants for promotional purposes in all print, electronic and password protected web media for organization promotions.

\*We do not allow any unofficial Pictures or Videos of the children without the consent of the Preschool staff.

YES \_\_\_\_\_ (initial)

## Termination condition

This agreement may be terminated by the facility with 2 weeks notice for the following: Parent/guardian has not cooperated with the facility regarding the child's discipline needs.

Parent / guardian has not paid the agreed upon fees or has been paying late for more than twice.

Consistent late pick-ups, if a child is picked up late thrice in a month and the parent does not agree to pay a late fee. *The first 5mins after 12.00pm/3.00pm/6.00pm ie 12.05/3.05/6.05 respectively will be grace period after which there will be \$1 per minute late fee (depending on the program selected by you) charge added to your account (without prior notice)*

If a child with consistent difficulties puts the health, safety, and welfare of him/herself, and /or that of another child or the children of the group at risk, a conference will be called to seriously discuss the situation with the parents and the possibility of withdrawal as per our policies.

If the Preschool Camp Agreement Form is not provide by the due date of-\_\_\_\_\_

## General Policies

Please fill out an application/emergency contact information form for your child on the first day of class if you haven't done so already. All fees must be paid in full in advance. All required documents should be completed and signed before the first day of your session. No refunds will be given for incomplete session or due to last minute cancellations from your side. The spot will not be guaranteed unless fees are paid in advance. Any absentees or missed sessions should be communicated to the staff by phone message or email. **If paying by check please make checks payable to India Community Center Preschool**

Email- [manasi@indiacc.org](mailto:manasi@indiacc.org)

Phone- 408 934 1140 x226

Print Name and Sign (Parent)-\_\_\_\_\_

**Please check the session/sessions your child has been enrolled for:**

Session one Half day program all 5 days (9.00-12.00) \_\_\_\_\_

Session three Full day Program all 5 days (9.00-3.00) \_\_\_\_\_

After Care Camp all 5 days (3.00-6.00)\_\_\_\_\_ (extra fee applicable)

**Please check the week/weeks your child has been enrolled for:**

Week of June 9<sup>th</sup> to June 13<sup>th</sup> - \_\_\_\_\_

Week of June 16<sup>th</sup> to June 20<sup>th</sup> - \_\_\_\_\_

Week of June 23<sup>rd</sup> to June 27<sup>th</sup> - \_\_\_\_\_

Week of June 30<sup>th</sup> to July 3<sup>rd</sup> \_\_\_\_\_

Week of July 7<sup>th</sup> to July 11<sup>th</sup> - \_\_\_\_\_

Week of July 14<sup>th</sup> to July 18<sup>th</sup> - \_\_\_\_\_

Week of July 21<sup>st</sup> to July 25<sup>th</sup> - \_\_\_\_\_

Week of July 28<sup>th</sup> to Aug 1<sup>st</sup> - \_\_\_\_\_

Week of Aug 4<sup>th</sup> to Aug 8<sup>th</sup> - \_\_\_\_\_

Week of Aug 11<sup>th</sup> to Aug 15<sup>th</sup> - \_\_\_\_\_

Week of Aug 18<sup>th</sup> to Aug 22<sup>nd</sup> \_\_\_\_\_

Parent Sign:\_\_\_\_\_ Date:\_\_\_\_\_

Director's Sign:\_\_\_\_\_ Date:\_\_\_\_\_

