



Joy Kids Learning Center, LLC.

20 Mayo Rd. Suite 203

Edgewater, Maryland. 21037

443.837.6001

www.joykidslearning.com

Preschool Registration Form 2025-2026

Child Information

Full name of child:	Nickname:
Date of Birth:	Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>

Enrollment Information

Full time child care (2 year old)	\$346 per week	<input type="checkbox"/>
Full time child care (3-5 year old)	\$311 per week	<input type="checkbox"/>
Two or Three day child care (2 year old)	\$84 daily	<input type="checkbox"/>
Two or three day child care (3-5 year old)	\$76 daily	<input type="checkbox"/>

Other fees per registration

Registration fee– new family only	\$100 (per child) \$125 (two or more children)
Registration fee– current family only	\$50 (per child) \$75 (two or more children)
Security deposit	1 week's tuition
Class fee	\$155 (per child/ per school year)
Late fees	\$35 late tuition payment \$2 per minute after 6PM

Parent/Guardian Details

Name:

Address:

Postcode:

Mobile phone number:

Work number:

Email:

Parent/Guardian Details

Name:

Address:

Postcode:

Mobile phone number:

Work number:

Email:

**Parents/Guardian— please read
and initial**

	I understand that tuition payments are not subject to reduction or refund due to absence from a holiday, vacation, illness, inclement weather, or scheduled days when child care is closed. Parents are not expected to pay tuition the week between Christmas and new Years.
	If Joy Kids Learning Center decides NOT to open due to inclement weather, parents are responsible for payment for the first two days . Should Joy Kids close due to weather for more than two days parents are not responsible for payment for those days . This does not include scheduled days when Child Care is closed.
	Joy Kids Learning Center hours are 7:00AM-6:00PM. A late fee of \$2 will be applied every minute after
	Registration will not be complete until all forms are properly filled out and returned to the Center's Office. <u>All fees are non-refundable, a registration fee is due at this time to secure your child/children's spot.</u>

I have read and filled out this form to the best of my knowledge:

Signature: _____ Date: _____



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Phone: 443.837.6001
Email: info@joykidslearning.com
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Child's Interest Information

Dear Parents/Guardians,

We are looking forward to having you and your child at Joy Kids Learning Center. In order to plan an exciting program of activities, we would like to know more about your child. Please take a few minutes to fill out this form and answer as many questions below as you can.

Parent's name _____ Date _____

Child's name _____ Nickname _____

Age _____

Parent's Primary Language _____ Child's Primary Language _____

Mother's home phone _____ Work _____

Father's home phone _____ Work _____

Child living with: Both parents _____ Mother _____ Father _____ Other _____

Brothers and sisters name and ages:

1. _____ 4. _____

2. _____

3. _____

Is this your child's first experience in structured child care? _____ yes _____ no

If no, was your child in a child care center or a home child care?

Countries, cultures that are represented in your family:

Holidays, celebrations, customs, traditions your family observes/how observed:

Tell us about some of the occupations and professions represented in your family:

What are some recipes and/or foods that represent your family culture? What foods are your family's favorites to eat and prepare?

Information about your child's interests

Please tell us about your child's favorite activities to do at home or in the neighborhood.



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Information about your child's temperament and personal style

Please tell us a little about your child's temperament and personal style so that we can provide appropriate guidance and support. (For example, is your child active? Quiet? Shy? Outgoing? Intense? Easygoing? Persistent? Distractible?)

What do you think are your child's best qualities?

Do you have any concerns/worries about your child?

Does your child have an IFSP or an IEP? May we have a copy for our records?

Will your child be receiving special education services while attending Joy Kids Learning Center?

INSTRUCTIONS TO PARENT/GUARDIAN:

- (1) Complete the following items, as appropriate, if your child has a condition(s) which might require emergency medical care.
- (2) If necessary, have your child's health practitioner review the information you provide below and sign and date where indicated.

Child's Name: _____ Date of Birth: _____

Medical Condition(s): _____

Medications currently being taken by your child: _____

Date of your child's last tetanus shot: _____

Allergies/Reactions: _____

EMERGENCY MEDICAL INSTRUCTIONS:

(1) Signs/symptoms to look for: _____

(2) If signs/symptoms appear, do this: _____

(3) To prevent incidents: _____

OTHER SPECIAL MEDICAL PROCEDURES THAT MAY BE NEEDED: _____

COMMENTS: _____

Note to Health Practitioner:

If you have reviewed the above information, please complete the following:

Name of Health Practitioner

Date

Signature of Health Practitioner

(_____) _____
Telephone Number



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Emergency Treatment Agreement

Joy Kids Learning Center will take every precaution necessary to ensure the safety of your child, however, in the event of an emergency:

Emergency response teams are authorized to treat my child _____, in the
name of child
event of an emergency.

I _____ give consent for the treatment of my child, _____
Name of parent name of child

by medical teams if medical attention is required.

This authorization is good for any attending physician at any hospital or doctors office my child/children may be taken to for treatment.

I, _____, will be responsible for the payment to the doctors or
Name of parent

hospitals for any services rendered, and release Joy Kids Learning Center from any financial liability.

Signed: _____ Date _____
Parent or guardian's signature

HEALTH INVENTORY

Information and Instructions for Parents/Guardians

REQUIRED INFORMATION

The following information is required prior to a child attending a Maryland State Department of Education licensed, registered, or approved child care or nursery school:

- **A physical examination** by a health care provider per COMAR 13A.15.03.04, 13A.16.03.04, 13A.17.03.04, and 13A.18.03.04. A Physical Examination form designated by the Maryland State Department of Education and the Maryland Department of Health shall be used to meet this requirement (See COMAR 13A.15.03.02, 13A.16.03.02, 13A.17.03.02 and 13A.18.03.02).
- **Evidence of immunizations.** The immunization certification form (MDH 896) or a printed or a computer-generated immunization record form and the required immunizations must be completed before a child may attend. This form can be found at: <https://earlychildhood.marylandpublicschools.org/child-care-providers/licensing/licensing-forms> Select MDH 896.
- **Evidence of Blood-Lead Testing for children younger than 6 years old.** The blood-lead testing certificate (MDH 4620) or another written document signed by a Health Care Practitioner shall be used to meet this requirement. This form can be found at: <https://earlychildhood.marylandpublicschools.org/child-care-providers/licensing/licensing-forms> Select MDH 4620.
- **Medication Administration Authorization Forms.** If the child is receiving any medications or specialized health care services, the parent and health care provider should complete the appropriate Medication Authorization and/or Special Health Care Needs form. These forms can be found at: Select Forms OCC 1216 through OCC 1216D as appropriate. <https://earlychildhood.marylandpublicschools.org/child-care-providers/licensing/licensing-forms>

EXEMPTIONS

Exemptions from a physical examination, immunizations, and Blood-Lead testing are permitted if the parent has an objection based on their bona fide religious beliefs and practices. The Blood-Lead certificate must be signed by a Health Care Practitioner stating a questionnaire was done.

Children may also be exempted from immunization requirements if a physician, nurse practitioner, or health department official certifies that there is a medical reason for the child not to receive a vaccine.

The health information on this form will be available only to those health and child care providers or child care personnel who have a legitimate care responsibility for the child.

INSTRUCTIONS

Part I of this Physical Examination form must be completed by the child's parent or guardian. Part II must be completed by a physician or nurse practitioner, or a copy of the child's physical examination must be attached to this form.

If the child does not have health care insurance or access to a health care provider, or if the child requires an individualized health care plan, contact the local Health Department. Information on how to contact the local Health Department can be found here: <https://health.maryland.gov/Pages/Home.aspx#>

The Child Care Scholarship (CCS) Program provides financial assistance with child care costs to eligible working families in Maryland. Information on how to apply for the Child Care Scholarship Program can be found here: <https://earlychildhood.marylandpublicschools.org/child-care-providers/child-care-scholarship-program>

PART I - HEALTH ASSESSMENT
To be completed by parent or guardian

Child's Name: _____			Birth date: _____		Sex M <input type="checkbox"/> F <input type="checkbox"/>
Last First Middle			Mo / Day / Yr		
Address: _____					
Number Street		Apt#	City		State Zip
Parent/Guardian Name(s)		Relationship	Phone Number(s)		
		W:	C:	H:	
		W:	C:	H:	
Medical Care Provider Name: Address: Phone:	Health Care Specialist Name: Address: Phone:	Dental Care Provider Name: Address: Phone:	Health Insurance <input type="checkbox"/> Yes <input type="checkbox"/> No Child Care Scholarship <input type="checkbox"/> Yes <input type="checkbox"/> No	Last Time Child Seen for Physical Exam: Dental Care: Specialist:	
ASSESSMENT OF CHILD'S HEALTH - To the best of your knowledge has your child had any problem with the following? Check Yes or No and provide a comment for any YES answer.					
	Yes	No	Comments (required for any Yes answer)		
Allergies	<input type="checkbox"/>	<input type="checkbox"/>			
Asthma or Breathing	<input type="checkbox"/>	<input type="checkbox"/>			
ADHD	<input type="checkbox"/>	<input type="checkbox"/>			
Autism	<input type="checkbox"/>	<input type="checkbox"/>			
Behavioral or Emotional	<input type="checkbox"/>	<input type="checkbox"/>			
Birth Defect(s)	<input type="checkbox"/>	<input type="checkbox"/>			
Bladder	<input type="checkbox"/>	<input type="checkbox"/>			
Bleeding	<input type="checkbox"/>	<input type="checkbox"/>			
Bowels	<input type="checkbox"/>	<input type="checkbox"/>			
Cerebral Palsy	<input type="checkbox"/>	<input type="checkbox"/>			
Communication	<input type="checkbox"/>	<input type="checkbox"/>			
Developmental Delay	<input type="checkbox"/>	<input type="checkbox"/>			
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>			
Ears or Deafness	<input type="checkbox"/>	<input type="checkbox"/>			
Eyes	<input type="checkbox"/>	<input type="checkbox"/>			
Feeding	<input type="checkbox"/>	<input type="checkbox"/>			
Head Injury	<input type="checkbox"/>	<input type="checkbox"/>			
Heart	<input type="checkbox"/>	<input type="checkbox"/>			
Hospitalization (When, Where, Why)	<input type="checkbox"/>	<input type="checkbox"/>			
Lead Poisoning/Exposure	<input type="checkbox"/>	<input type="checkbox"/>			
Life Threatening Allergic Reactions	<input type="checkbox"/>	<input type="checkbox"/>			
Limits on Physical Activity	<input type="checkbox"/>	<input type="checkbox"/>			
Meningitis	<input type="checkbox"/>	<input type="checkbox"/>			
Mobility-Assistive Devices if any	<input type="checkbox"/>	<input type="checkbox"/>			
Prematurity	<input type="checkbox"/>	<input type="checkbox"/>			
Seizures	<input type="checkbox"/>	<input type="checkbox"/>			
Sensory Disorder	<input type="checkbox"/>	<input type="checkbox"/>			
Sickle Cell Disease	<input type="checkbox"/>	<input type="checkbox"/>			
Speech/Language	<input type="checkbox"/>	<input type="checkbox"/>			
Surgery	<input type="checkbox"/>	<input type="checkbox"/>			
Vision	<input type="checkbox"/>	<input type="checkbox"/>			
Other	<input type="checkbox"/>	<input type="checkbox"/>			
Does your child take medication (prescription or non-prescription) at any time? and/or for ongoing health condition? <input type="checkbox"/> No <input type="checkbox"/> Yes, If yes, attach the appropriate OCC 1216 form.					
Does your child receive any special treatments? (Nebulizer, EPI Pen, Insulin, Blood Sugar check, Nutrition or Behavioral Health Therapy /Counseling etc.) <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, attach the appropriate OCC 1216 form and Individualized Treatment Plan					
Does your child require any special procedures? (Urinary Catheterization, Tube feeding, Transfer, Ostomy, Oxygen supplement, etc.) <input type="checkbox"/> No <input type="checkbox"/> Yes, If yes, attach the appropriate OCC 1216 form and Individualized Treatment Plan					
I GIVE MY PERMISSION FOR THE HEALTH PRACTITIONER TO COMPLETE PART II OF THIS FORM. I UNDERSTAND IT IS FOR CONFIDENTIAL USE IN MEETING MY CHILD'S HEALTH NEEDS IN CHILD CARE.					
I ATTEST THAT INFORMATION PROVIDED ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF.					
Printed Name and Signature of Parent/Guardian _____					Date _____

PART II - CHILD HEALTH ASSESSMENT
To be completed **ONLY** by Health Care Provider

Child's Name: _____				Birth Date: _____		Sex M <input type="checkbox"/> F <input type="checkbox"/>	
Last		First		Middle		Month / Day / Year	
1. Does the child named above have a diagnosed medical, developmental, behavioral or any other health condition? <input type="checkbox"/> No <input type="checkbox"/> Yes, describe: _____							
2. Does the child receive care from a Health Care Specialist/Consultant? <input type="checkbox"/> No <input type="checkbox"/> Yes, describe: _____							
3. Does the child have a health condition which may require EMERGENCY ACTION while he/she is in child care? (e.g., seizure, allergy, asthma, bleeding problem, diabetes, heart problem, or other problem) If yes, please DESCRIBE and describe emergency action(s) on the emergency card. <input type="checkbox"/> No <input type="checkbox"/> Yes, describe: _____							
4. Health Assessment Findings							
Physical Exam	WNL	ABNL	Not Evaluated	Health Area of Concern	NO	YES	DESCRIBE
Head	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Allergies	<input type="checkbox"/>	<input type="checkbox"/>	
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Asthma	<input type="checkbox"/>	<input type="checkbox"/>	
Ears/Nose/Throat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attention Deficit/Hyperactivity	<input type="checkbox"/>	<input type="checkbox"/>	
Dental/Mouth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Autism	<input type="checkbox"/>	<input type="checkbox"/>	
Respiratory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bleeding Disorder	<input type="checkbox"/>	<input type="checkbox"/>	
Cardiac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	
Gastrointestinal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Eczema/Skin issues	<input type="checkbox"/>	<input type="checkbox"/>	
Genitourinary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Feeding Device	<input type="checkbox"/>	<input type="checkbox"/>	
Musculoskeletal/orthopedic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lead Exposure/Elevated Lead	<input type="checkbox"/>	<input type="checkbox"/>	
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mobility Device	<input type="checkbox"/>	<input type="checkbox"/>	
Endocrine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nutrition	<input type="checkbox"/>	<input type="checkbox"/>	
Skin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical illness/impairment	<input type="checkbox"/>	<input type="checkbox"/>	
Psychosocial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Respiratory Problems	<input type="checkbox"/>	<input type="checkbox"/>	
Vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Seizures/Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	
Speech/Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sensory Disorder	<input type="checkbox"/>	<input type="checkbox"/>	
Hematology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Developmental Disorder	<input type="checkbox"/>	<input type="checkbox"/>	
Developmental Milestones	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other:			
REMARKS: (Please explain any abnormal findings.) _____ _____							
5. Measurements		Date		Results/Remarks			
Tuberculosis Screening/Test, if indicated							
Blood Pressure							
Height							
Weight							
BMI % tile							
Developmental Screening							
6. Is the child on medication? <input type="checkbox"/> No <input type="checkbox"/> Yes, indicate medication and diagnosis: (OCC 1216 Medication Authorization Form must be completed to administer medication in child care). https://earlychildhood.marylandpublicschools.org/child-care-providers/licensing/licensing-forms							
7. Should there be any restriction of physical activity in child care? <input type="checkbox"/> No <input type="checkbox"/> Yes, specify nature and duration of restriction: _____							
8. Are there any dietary restrictions? <input type="checkbox"/> No <input type="checkbox"/> Yes, specify nature and duration of restriction: _____							
9. RECORD OF IMMUNIZATIONS – MDH 896 or other official immunization document (e.g. military immunization record of immunizations) is required to be completed by a health care provider or a computer generated immunization record must be provided. (This form may be obtained from: https://earlychildhood.marylandpublicschools.org/child-care-providers/licensing/licensing-forms Select MDH 896.)							
10. RECORD OF LEAD TESTING - MDH 4620 or other official document is required to be completed by a health care provider. (This form may be obtained from: https://earlychildhood.marylandpublicschools.org/child-care-providers/licensing/licensing-forms Select MDH 4620) Under Maryland law, all children younger than 6 years old who are enrolled in child care must receive a blood lead test at 12 months and 24 months of age. Two tests are required if the 1st test was done prior to 24 months of age. If a child is enrolled in child care during the period between the 1st and 2nd tests, his/her parents are required to provide evidence from their health care provider that the child received a second test after the 24 month well child visit. If the 1st test is done after 24 months of age, one test is required.							

Additional Comments: _____

Health Care Provider Name (Type or Print):	Phone Number:	Health Care Provider Signature:	Date:

CHILD'S NAME _____													
LAST				FIRST				MI					
SEX: MALE <input type="checkbox"/>		FEMALE <input type="checkbox"/>		BIRTHDATE _____ / _____ / _____									
COUNTY _____				SCHOOL _____				GRADE _____					
PARENT OR GUARDIAN NAME _____								PHONE NO. _____					
ADDRESS _____								CITY _____ ZIP _____					

Dose #	DTP-DTaP-DT Mo/Day/Yr	Polio Mo/Day/Yr	Hib Mo/Day/Yr	Hep B Mo/Day/Yr	PCV Mo/Day/Yr	Rotavirus Mo/Day/Yr	MCV Mo/Day/Yr	HPV Mo/Day/Yr	Hep A Mo/Day/Yr	MMR Mo/Day/Yr	Varicella Mo/Day/Yr	Varicella Disease Mo / Yr	COVID-19 Mo/Day/Yr
1	DOSE #1	DOSE #1	DOSE #1	DOSE #1	DOSE #1	DOSE #1	DOSE #1	DOSE #1	DOSE #1	DOSE #1	DOSE #1		DOSE #1
2	DOSE #2	DOSE #2	DOSE #2	DOSE #2	DOSE #2	DOSE #2	DOSE #2	DOSE #2	DOSE #2	DOSE #2	DOSE #2		DOSE #2
3	DOSE #3	DOSE #3	DOSE #3	DOSE #3	DOSE #3	DOSE #3	DOSE #3	DOSE #3	Td Mo/Day/Yr	Tdap Mo/Day/Yr	MenB Mo/Day/Yr	Other Mo/Day/Yr	
4	DOSE #4	DOSE #4	DOSE #4	DOSE #4	DOSE #4								
5	DOSE #5												

To the best of my knowledge, the vaccines listed above were administered as indicated.

1. _____

Signature _____ Title _____ Date _____

(Medical provider, local health department official, school official, or child care provider only)

2. _____

Signature _____ Title _____ Date _____

3. _____

Signature _____ Title _____ Date _____

Lines 2 and 3 are for certification of vaccines given after the initial signature.

COMPLETE THE APPROPRIATE SECTION BELOW IF THE CHILD IS EXEMPT FROM VACCINATION ON MEDICAL OR RELIGIOUS GROUNDS. ANY VACCINATION(S) THAT HAVE BEEN RECEIVED SHOULD BE ENTERED ABOVE.

MEDICAL CONTRAINDICATION:

Please check the appropriate box to describe the medical contraindication.

This is a: ☐ Permanent condition OR ☐ Temporary condition until _____/_____/_____
Date

The above child has a valid medical contraindication to being vaccinated at this time. Please indicate which vaccine(s) and the reason for the contraindication, _____

Signed: _____ Date _____

 Medical Provider / LHD Official

RELIGIOUS OBJECTION:

I am the parent/guardian of the child identified above. Because of my bona fide religious beliefs and practices, I object to any vaccine(s) being given to my child. This exemption does not apply during an emergency or epidemic of disease.

Signed: _____ Date: _____

How To Use This Form

The medical provider that gave the vaccinations may record the dates (using month/day/year) directly on this form (check marks are not acceptable) and certify them by signing the signature section. Combination vaccines should be listed individually, by each component of the vaccine. A different medical provider, local health department official, school official, or child care provider may transcribe onto this form and certify vaccination dates from any other record which has the authentication of a medical provider, health department, school, or child care service.

Only a medical provider, local health department official, school official, or child care provider may sign ‘Record of Immunization’ section of this form. This form may not be altered, changed, or modified in any way.

Notes:

1. When immunization records have been lost or destroyed, vaccination dates may be reconstructed for all vaccines except **varicella, measles, mumps, or rubella**.
2. Reconstructed dates for all vaccines must be reviewed and approved by a medical provider or local health department no later than 20 calendar days following the date the student was temporarily admitted or retained.
3. Blood test results are NOT acceptable evidence of immunity against diphtheria, tetanus, or pertussis (DTP/DTaP/Tdap/DT/Td).
4. Blood test verification of immunity is acceptable in lieu of polio, measles, mumps, rubella, hepatitis B, or varicella vaccination dates, but **revaccination may be more expedient**.
5. History of disease is NOT acceptable in lieu of any of the required immunizations, except varicella.

Immunization Requirements

The following excerpt from the MDH Code of Maryland Regulations (COMAR) 10.06.04.03 applies to schools:

“A preschool or school principal or other person in charge of a preschool or school, public or private, may not knowingly admit a student to or retain a student in a:

- (1) Preschool program unless the student's parent or guardian has furnished evidence of age appropriate immunity against Haemophilus influenzae, type b, and pneumococcal disease;
- (2) Preschool program or kindergarten through the second grade of school unless the student's parent or guardian has furnished evidence of age-appropriate immunity against pertussis; and
- (3) Preschool program or kindergarten through the 12th grade unless the student's parent or guardian has furnished evidence of age-appropriate immunity against: (a) Tetanus; (b) Diphtheria; (c) Poliomyelitis; (d) Measles (rubeola); (e) Mumps; (f) Rubella; (g) Hepatitis B; (h) Varicella; (i) Meningitis; and (j) Tetanus-diphtheria-acellular pertussis acquired through a Tetanus-diphtheria-acellular pertussis (Tdap) vaccine.”

Please refer to the “**Minimum Vaccine Requirements for Children Enrolled in Pre-school Programs and in Schools**” to determine age-appropriate immunity for preschool through grade 12 enrollees. The minimum vaccine requirements and MDH COMAR 10.06.04.03 are available at www.health.maryland.gov. (Choose Immunization in the A-Z Index)

Age-appropriate immunization requirements for licensed childcare centers and family day care homes are based on the Department of Human Resources COMAR 13A.15.03.02 and COMAR 13A.16.03.04 G & H and the “**Age-Appropriate Immunizations Requirements for Children Enrolled in Child Care Programs**” guideline chart are available at www.health.maryland.gov. (Choose Immunization in the A-Z Index)

MARYLAND DEPARTMENT OF HEALTH BLOOD LEAD TESTING CERTIFICATE

For a copy of this form in another language, please contact the MDH Environmental Health Helpline at (866) 703-3266.

CHILD'S NAME: _____
LAST FIRST MI

SEX: MALE ☐ FEMALE ☐ BIRTHDATE: _____
MM/DD/YYYY

PARENT/GUARDIAN NAME: _____ PHONE NO.: _____

ADDRESS: _____ CITY: _____ ZIP: _____

Test Date (mm/dd/yyyy)	Type of Test (V = venous, C = capillary)	Result (µg/dL)	Comments
	Select a test type.		
	Select a test type.		
	Select a test type.		

Health care provider or school health professional or designee only: To the best of my knowledge, the blood lead tests listed above were administered as indicated. (Line 2 is for certification of blood lead tests after the initial signature.)

1.	_____ Name	_____ Title	Clinic/Office Name, Address, Phone
	_____ Signature	_____ Date	
2.	_____ Name	_____ Title	
	_____ Signature	_____ Date	

Health care provider: Complete the section below if the child's parent/guardian refuses to consent to blood lead testing due to the parent/guardian's stated bona fide religious beliefs and practices:

Lead Risk Assessment Questionnaire Screening Questions:

- Yes ☐ No ☐ 1. Does the child live in or regularly visits a house/building built before 1978?
Yes ☐ No ☐ 2. Has the child ever lived outside the United States or recently arrived from a foreign country?
Yes ☐ No ☐ 3. Does the child have a sibling or housemate/playmate being followed or treated for lead poisoning?
Yes ☐ No ☐ 4. Does the child frequently put things in his/her mouth such as toys, jewelry, or keys, or eat non-food items (pica)?
Yes ☐ No ☐ 5. Does the child have contact with an adult whose job or hobby involves exposure to lead?
Yes ☐ No ☐ 6. Is the child exposed to products from other countries such as cosmetics, health remedies, spices, or foods?
Yes ☐ No ☐ 7. Is the child exposed to food stored or served in leaded crystal, pottery or pewter, or made using handmade cookware?

Provider: If any responses are **YES**, I have counseled the parent/guardian on the risks of lead exposure. _____
Provider Initial

Parent/Guardian: I am the parent/guardian of the child identified above. Because of my bona fide religious beliefs and practices, I object to any blood lead testing of my child and understand the potential impact of not testing for lead exposure as discussed with my child's health care provider.

Parent/Guardian Signature

Date

MARYLAND DEPARTMENT OF HEALTH BLOOD LEAD TESTING CERTIFICATE

For a copy of this form in another language, please contact the MDH Environmental Health Helpline at (866) 703-3266.

How To Use This Form

➔ **A health care provider may provide the parent/guardian with a copy of the child's blood lead testing results from ImmuNet as an alternative to completing this form (COMAR 10.11.04.05(B)).**

Maryland requires all children to be tested at the 12 and 24 month well-child visits (at 12-14 and 24-26 months old respectively), and both test results should be included on this form (see COMAR 10.11.04). If the test at the 12-month visit was missed, then the results of the test after 24 months of age is sufficient. A child who was not tested at 12 or 24 months should be tested as early as possible.

A parent/guardian and a child's health care provider should complete this form when enrolling a child in child care, pre-kindergarten, kindergarten, or first grade. Completed forms should be submitted by the parent/guardian to the Administrator of a licensed child care, public pre-kindergarten, kindergarten, or first grade program prior to entry. The child's health care provider may record the test dates and results directly on this form and certify them by signing or stamping the signature sections. A school health professional or designee may transcribe onto this form and certify test dates from any other record that has the authentication of a medical provider, health department, or school. All forms are kept on file with the child's school health record.

Frequently Asked Questions

1. Who should be tested for lead?

All children in Maryland should be tested for lead poisoning at 12 and 24 months of age.

2. What is the blood lead reference value, and how is it interpreted?

Maryland follows the [CDC blood lead reference value](#), which is 3.5 micrograms per deciliter (µg/dL). However, there is no safe level of lead in children.

3. If a capillary test (finger prick or heel prick) shows elevated blood lead levels, is a confirmatory test required?

Yes, if a capillary test shows a blood lead level of ≥ 3.5 µg/dL, a confirmatory venous sample (blood from a vein) is needed. The higher the blood lead level is on the initial capillary test, the more urgent it is to get a confirmatory venous sample. See [Table 1](#) (CDC) for the recommended schedule.

4. What kind of follow-up or case management is required if a child has a blood lead level above the CDC blood lead reference value?

Providers should refer to the CDC's Recommended Actions Based on Blood Lead Level (<https://www.cdc.gov/ncet/lead/advisory/acclpp/actions-blls.htm>).

5. What programs or resources are available to families with a child with lead exposure?

Maryland and local jurisdictions have programs for families with a child exposed to lead:

- Maryland Home Visiting Services for Children with Lead Poisoning
- Maryland Healthy Homes for Healthy Kids – no-cost program to remove lead from homes

For more information about these and other programs, call the Environmental Health Helpline at (866) 703-3266 or visit: <https://health.maryland.gov/phhp/OEHFP/EH/Pages/Lead.aspx>.

Maryland Department of the Environment Center for Childhood Lead Poisoning Prevention: <https://mde.maryland.gov/programs/LAND/LeadPoisoningPrevention/Pages/index.aspx>

Families can also contact the Mid-Atlantic Center for Children's Health & the Environment Pediatric Environmental Health Specialty Unit – Villanova University, Washington, DC.

Phone: (610) 519-3478 or Toll Free: (833) 362-2243

Website: <https://www1.villanova.edu/university/nursing/macche.html>



2025

Parent Handbook

Philosophy

Joy Kids Learning Center is excited to offer an educational program for children of all abilities, languages, and cultures. Our program utilizes developmentally appropriate practices that enhance the social, emotional, physical, and intellectual development of each child.

Joy Kids Learning Center believes open communication between teachers, students, administration, and parents is critical to the overall success of the children, the family unit, and the Learning Center. Parents/guardians are encouraged to be actively involved in their child's education through volunteering at the center and participating in special events.

The educated, certified teachers strive to create a fun, safe respectful, and religious based environment with both child initiated and teacher directed activities. The lesson and activities reflect the children's interests, as well as their primary language and culture.

Joy Kids Learning Center encourages and provides opportunities for staff development in ECE. We strive to keep our staff current on the latest research and best practices in Early Childhood Education.

Curriculum

Joy Kids Learning Center, LLC, uses The Creative Curriculum for all the ages and abilities in our care. We use the curriculum's hands on, themed, approach in conjunction with the learning domains and objectives in Healthy Beginnings and the Maryland Early Learning Standards as the basis for weekly lesson plans.

The curriculum allows the teacher to individualize, considering the children's abilities, language, and culture. Written monthly themes, sub-themes, and interest area suggestions ensure the teachers can create lessons that all children can participate in, promote multiple modes of exploration and learning, and that follow the children's interests.

In order to benefit the most from our curriculum, children should arrive no later than 9:30 AM.

Mission

The mission of Joy Kids Learning Center is to provide a faith based learning environment and to insure a experience for young children.

Goals

The goal of Joy Kids Learning Center is to provide a safe, loving environment in which faith based child care services can be provided to children from the ages of two to ten years old for the Edgewater community. Children not potty trained will be admitted.

Enrollment will be granted without discrimination in regards to sex, race, color, religion, sexual orientation or political preference. We do require a pre-enrollment visit. Full-time/ Part-time enrollment is defined as follows:

Full Time:

A child enrolled Monday through Friday is considered full time.

School-age is M - F before & after school.

Part Time:

A child enrolled two or three full days per week is considered part time.

Our school year runs from August to June. Re-registration will occur each year in February.

Summer: Summer enrollment is separate from the school year. Registration for summer enrollment will occur in January. Currently enrolled families must enroll for a minimum of 2 days in summer to hold fall spot.

Positive Behavioral Practices Policy

At Joy Kids Learning Center we take many steps to build positive relationships with the children and families in our program. For example, we greet all children and families as they arrive each day, we keep a line of communication open with families by using casual conversation, conferences, emails and the pro care app and we host family activities like field trips, a Thanksgiving Feast for the children and a Christmas program.

We use a variety of strategies to encourage children's positive behaviors and help them avoid negative behavior such as clearly stating the rules and expectations, modeling positive & effective ways to express their feelings and emotions, supporting reflection, problem solving & compromise between children and redirecting children toward positive behavior.

***** Please read our complete Positive Behavioral Practices Policy attached at the end of this handbook**

Potty Training

Joy Kids Learning Center admits children who are not potty trained into our Jellyfish and Bumblebee classrooms. Children in the Bluebird and Pre-K classrooms must be potty trained.

Children with an IEP or medical documentation will be the exception to this rule.

Children in diapers and pull-ups should arrive at school in a dry diaper.

Inclusion Policy

Joy Kids Learning Center, LLC welcomes all children and is committed to providing developmentally appropriate early learning experiences that allow full access and participation of every child. We believe that each child is a gift from God and is unique. We work in partnership with the families and other professionals involved with the child to provide the support each child needs to reach their full potential. Joy Kids Learning Center acknowledges and respects the priorities each family has for their child. Families are encouraged and supported to collaborate with staff to ensure that each child has an opportunity for optimum success.

The Teachers at Joy Kids Learning Center use developmentally appropriate practices and consider the individual needs of all children when planning. Staff will make every attempt to make any adaptations or modifications necessary to meet the needs of the children. Schedules, routines and activities are flexible and the teachers work with therapists, special educators and other professionals to integrate individual accommodations and strategies into the classroom routines and activities. Training and support is provided to ensure that all staff is comfortable, confident and competent to meet the developmental and educational needs of all children at Joy Kids.

Joy Kids Learning Center is open from 7:00AM—6:00 PM, Monday through Friday. The center is open year round.

Our school will be closed on the major holidays listed below. Payment is required for these holidays. We are required to follow strict child-staff ratios; therefore, we are unable to switch your child's day of attendance in the event of a holiday. Additionally Joy Kids will close for several staff development days. These days are listed below in the far right column.

New Years Day	Labor Day	Friday before Presidents Day
Martin Luther King Day	Thanksgiving Day and Day after	Thursday & Friday before
President's Day	Christmas Eve	school year (September)
Good Friday & Easter Monday	Christmas Day	
Professional Development/ Training Conference		
Memorial Day	New Year's Eve	
Independence Day (July 4)	Juneteenth (June 19th)	

Arrival and Departure

- Upon arrival and departure you are required to sign your child in and out each day. The Maryland State department of Education (MSDE) requires that we keep accurate attendance records each day in case of an emergency evacuation.
- If someone other than you will be picking up your child from Joy Kids, please notify the Directors in writing via email. We will not release your child to anyone not listed on your child's emergency contact form. Be sure the person picking up your child has a picture ID with them.
- Children in diapers and pull-ups must arrive at school in a dry diaper or pull-up.

Communication

Joy Kids Learning Center believes that open communication is essential in the relationship between the teachers and administration of Joy Kids and the families whose children attend our center. We use many different forms of communication. Teachers talk with parents/guardians at drop off and pick up. We have the pro care app that sends messages and pictures. We also use email, text alerts, hand written notes and conferences.

Ways parents can help

- Please be sure your child arrives at Joy Kids Learning Center by 9:30 AM to ensure that they receive the most from our educational program.
- Please inform teachers of any changes before they happen. Changes at home often lead to changes in your child's behavior at school.
- Play clothes are recommended! Have all clothing marked with the child's name.
- All children need to be signed in and out every day by the person bringing or picking them up.
- Sippy cups are not allowed at Joy Kids. Please send a reusable water bottle.
- Please do not send a pacifier to school with your child.
- Parents are always welcome. Feel free to visit your child's class at any time. We encourage parents to volunteer also.
- Family conferences are scheduled twice a year in November and April.
- Individual cots are furnished by the parents for rest time. These will be sent home on Fridays to be washed.

Emergency Preparedness Plan

Joy Kids Learning Center will strive to keep your child safe at all times when he/she is in our care. With recent world and local events, we have developed an emergency plan that will be put into place in the event that special circumstances require a different type of care. Plans for these special types of care are reviewed annually. Staff is trained in the appropriate response and local emergency management is aware of these plans. The specific type of emergency will guide where and what special care will be provided.

- **Shelter at the site** – This plan would be put into place in the event of weather emergency or unsafe outside conditions or threats. In this plan, children will be cared for indoors at the center and the center may be secured or locked to restrict entry. Parents will be notified if they need to pick up their child before their regular time.
- **Evacuation to another site** – This plan would be put into place in the event that it is not safe for the children to remain at the center. In this situation, staff has predetermined alternate sites for care. Each center has agreements with two local alternate sites. For more information on alternate sites please ask your center Director.
- **Method to contact parents** – in the event of emergency, parents will be called, texted and/or emailed, a note will be placed on the door, and radio/TV stations will be alerted to provide more specific information. You can also check for information on our website www.joykidslearning.com or Facebook page. Depending on the distance from the center, the children will walk if feasible or be transported to the alternate site.
- **Emergency ends/reuniting with children** – When the emergency ends, parents will be informed and reunited with their children as soon as possible. The contact methods listed above will be used to inform parents.
- **Pandemic** - In the event of a pandemic Joy Kids Learning Center will follow the rules and guidance directed to us by our local and State government and the Maryland State Department of Education. We have policies and procedures in place to protect the students, families and staff during a pandemic if we are able to be open and operating. For more information on these policies and procedures please ask your center Director.

The purpose for sharing this information with you is not to cause you worry, but to reassure you that we are prepared to handle all types of emergencies in a way that will ensure the safety of your child. If you have questions regarding this information, talk with the center director or your child's teacher.



Inclement Weather Policy



In the event of inclement weather, we will make every attempt to open the center. In the event that Anne Arundel County Public Schools has a delayed opening, or is closed, Joy Kids Learning Center will leave a message on our answering machine, send out an e-mail and a message on the pro care app with instructions for the day and put the information on Facebook and our website. Check www.aacps.org for public school closing information. If Anne Arundel County government is closed, Joy Kids will **NOT** open.

Should inclement weather occur during business hours Joy Kids Learning Center will make every reasonable attempt to remain open. However, in the case of extremely dangerous road conditions or a statewide emergency it may be necessary for Joy Kids to close early. If we need to close early you will be notified to pick up your child as soon as possible. Keep all emergency contact information current so that we are able to immediately contact you.

Illness and Communicable Disease policy



Joy Kids Learning Center is committed to keeping our school a healthy place for your child. To ensure success please watch your child for symptoms of contagious illness. To protect your child as well as the other children attending our school, please keep your child home if they have:

Conjunctivitis - an eye infection commonly called pink eye. The eye is red and itchy and may have yellow drainage. Children may return 24 hours after the first dose of medication.

Elevated Temperature— of 100 degrees or more. If your child has a fever the night before, they are most likely not well enough to attend school. **Children must be fever free without the use of medications for 24 hours before returning to school.**

Diarrhea/vomiting— loose, more frequent stools (more than twice a day). Upset stomach.

Ear or throat infection (strep throat) - unless the child has been diagnosed by a physician and has been on antibiotics for 24 hours.

Impetigo or Ringworm— a very contagious skin condition.

Symptoms of Covid-19

If your child shows signs or symptoms of COVID—19 we will do our best to make the child comfortable while arrangements are made to have the child picked up. Chil-

dren who are sent home due to suspected COVID will not be permitted to return to school until a negative PCR test is obtained or they have completed the recommended quarantine or isolation. The only exception to this rule would be if a licensed physician indicates in writing that the child presents no health risk to others and is now able to participate in all regular school activities.

The Department of Health requires that certain communicable diseases be reported to them within 24 hours so that control measures, if needed, can be implemented. Parents and staff are urged to notify the school within 24 hours if a child or family member has developed a known or suspected communicable disease.

Examples of “reportable diseases” include the following, but are not limited to:

- Chickenpox
- Measles
- Mumps
- Rubella (German Measles)
- Whooping cough
- Fifth disease
- Tuberculosis
- Hepatitis A
- Lyme disease
- Shigellosis
- **COVID-19**

A full list of reportable diseases is available at www.aahealth.org

Medication Policy

Should your child require prescription medication while at Joy Kids Learning Center, the state requires a medication order form (available on our website), be completed and signed by the parent and physician. All medication must remain in the original container and must be accompanied by the RX. The RX must have the child’s full name, date(s) to be given, dosage amount, and any other specific directions. **This procedure includes all prescription medication. School age children are not excluded from this policy. If a school age child has asthma or allergies we must have their needed medication on site or travel back and forth with the child if they have permission by parent to self medicate.**

Non-prescription medications must be accompanied by a medication order form filled out and signed by the physician and must be in it’s original container.

All medication will be kept in a locked, labeled container in the classroom. Parents must bring medication and forms and give them to the director.

If your child has asthma or allergies an asthma or allergy action plan must be filled out and reviewed/signed by your physician.

Immunizations that are **exempt** for Religious Objection must have it in writing from the parent.

The Blood Lead Testing Certificate is for all students/children including school age children in our care. This form must be signed by a physician.

Tuition and fees policy

Registration: A non-refundable registration fee of \$100, \$125 for two or more children, is due upon registration for new families.

Registration for currently enrolled families is \$50, \$75 for two or more children upon annual registration.

Security Deposit: One week's tuition. This will be held and used for your child's last week at Joy Kids. This is due before your child begins at Joy Kids.

Class Fee: \$155 is due annually upon registration for pre-school and Pre-K aged children

School Age Summer Program: All school age children **must be enrolled for at least 2 days per week for summer to hold their spot for fall.**

These rates are effective January, 2026:

<u>Weekly rate (2 year old) -</u>	\$346
<u>Daily rate (2 year old) -</u>	\$84
<u>Weekly rate (3 - 5 year old) -</u>	\$311
<u>Daily rate (3 - 5 year old) -</u>	\$76
<u>Weekly rate (5-10) Before & After care</u>	\$145/Edge \$149/C
<u>Daily rate Before & After care</u>	\$36/Edge \$37/C

Discounts: 10% discount for 2 or more children (discount given to lowest tuition).

5% discount for active Joy Reigns Lutheran Church members.

Inclement weather payment: Parents are responsible for payment of tuition for the first three days per incident and calendar year that Joy Kids closes due to inclement weather.

Should Joy Kids close for more than three days, per incident and calendar year, parents are not responsible for payment for those additional days.

Late payment fee: Weekly tuition is due by **close of business Monday** for the upcoming week. Late tuition payments are subject to a \$35 late payment fee. **Accounts may not be more than two (2) weeks past due.**

*Returned or declined payments are subject to a **\$35 fee.***

Late pick-up fee: Our school closes promptly at 6:00 PM. If you arrive after 6:00 PM you will owe a fee of \$2 per minute, per child, collected by the Director the next day.

****IMPORTANT NOTE:**

All fees (registration, security deposit and class fees) are non-refundable. Unless discussed with a director and/or owner regarding certain circumstances. As stated above your security deposit will be

Termination of services by parent

In the event that you need to terminate your agreement, **two weeks written notice is required.** If you abruptly withdraw your child without the proper notification of a two weeks notice, your security deposit will be forfeited. With the proper advance notification, you may use your security deposit towards your last week of service.

Tuition Increase

Joy Kids Learning Center LLC, may increase tuition by at least 3-5% each year.

Referral Policy



We love it when you refer your friends, family and coworkers to Joy Kids Learning Center! Thank you! When a new family registers their child, and lets us know you referred them, you will receive \$50 off your next weeks tuition!

Scholarship/Subsidy Families

If a family has a scholarship upon registering they will need to present the director with signed scholarships to be filled out and sent to MSDE for processing. You will be financially responsible for full tuition rates until your subsidy is approved and MSDE sends their first payment on your behalf. The director will email you upon receipt of payment from the state and calculate your intended co-payments for each month.

****Pre-K Last week of care**

Pre-K children's last week of care after completing the summer program will always be the **last day** of the program. Your prepaid security deposit will be used for the last week. The following week is Joy Kids and AACPS first week of school and your child/children cannot remain in our care **unless** your child/children are enrolled in our school age program for the new school year.

Back to school night

Joy Kids Learning Center will hold a Back-to-School night for all families and children moving from one class to another. This is an adult only event. The evening will be an opportunity to gather center information, ask questions, and meet your child's teachers. **For participating you will be entered in a raffle for 50% off a weeks tuition of your choice.**

Toys from home

Children are encouraged to leave their personal toys at home to prevent breakage, loss, and disagreements. They may bring a special toy on Show and Tell days only or a "comfort" stuffed animal for during nap time. The teacher will inform parents of the days when Show and Tell occur during the week. Joy Kids Learning Center cannot be held responsible for personal items should they become lost, broken or stolen from the center.

In the event that your child takes a toy or part of a game home, we would appreciate it if you would kindly return it to the center.



Birthdays

At Joy Kids Learning Center we love celebrating birthdays! Families can inquire about your child's birthday celebration with the teacher. Families who wish to provide a small, special, store bought snack time treat may do so, but must make advanced arrangements with the classroom teacher. Joy Kids discourages families from distributing birthday invitations to private birthday parties via the school unless the entire class is invited.

Screening and Assessment

Joy Kids Learning Center screens each child upon entrance to our program using Ages & Stages Questionnaire 3rd edition (ASQ-3™). Throughout the year we assess your child's development using developmental checklists and observations. Progress reports are sent home in November and April using an assessment aligned with the Creative Curriculum and the MD Early Learning Standards. Parent/teacher conferences are held at those times.

Meals

Milk and water are provided at Joy Kids for all snacks & meals. There is no need to send a drink unless your child is on a special diet.

Breakfast will be served to the children who arrive prior to 8:15am. A mid-morning snack is also served by our staff. Both meals consists of choices recommended by the United States Department of Agriculture (USDA) and follow the Maryland State Department of Education (MSDE) guidelines. Fresh or frozen fruit and/or vegetables are served at least twice a week for snack. Fresh or frozen fruit is available daily for breakfast.

You are responsible to send a lunch for your child in a small labeled lunch box. Parents are also reminded to pack enough food for an afternoon snack. Please be sure to include at least one serving of fresh/ frozen fruit or vegetables each day and be sure that the food is "ready to eat", i.e. fruit peeled and sliced. Children will be monitored to ensure they eat their "main" food, e.g. sandwich, and their fruit or vegetable before they eat any snack food packed in their lunch. We provide utensils for all meals and the staff will heat up food as needed. **Please refrain from sending items easily choked on in your child's lunch or snack. No candy, juice or soda please.**

School age children **should be provided a snack by their parents** and will be served their snack each day after school.

Joy Kids is a Peanut-free Center.

Joy Kids Learning Center will supplement children's meals as necessary to ensure they receive proper nutrition.

SPECIAL DIET:

If your child has any food allergies, your physician's written instructions concerning such allergies must be on file at the center. Please notify us if your child has any food restrictions due to religious beliefs. We will ask parents for their permission to place their child on a posted allergy list to ensure that all staff is well informed.

Field Trips

We will schedule various in-house and out house field trips throughout the year. We will need parent volunteers we do not provide a bus for field trips. A completed permission slip must be submitted for each child in order for them to attend the field trip. We will ask parents to drive and chaperone for all out house field trips. Two year old children are required to have a chaperone for all field trips. School age children do not need a chaperone and can ride the van.

Physical Fitness

Children love to play and be active. Joy Kids Learning Center is committed to offering as much time as possible for free, unstructured play outside on the playground. We believe that exercise and unstructured play time are vital to each child's physical and mental health. The American Heart Association recommends active play throughout the day for 2—5 year old children, and at least 3 hours of active play each day for children ages 6 +. Each class is required to spend 1/2 hour outside morning and afternoon at a minimum. Additionally, the teacher's include dancing and games in their lessons for more active movement. By incorporating as much active play as possible during the day we hope to build lasting healthy habits in the children attending Joy Kids Learning Center.

Student tablet/computer acceptable use policy

Joy Kids Learning Center, LLC, is excited to provide supervised access to tablets for our students. We are committed to helping educate our students on the proper use of technology. The following policy provides guidelines for use of this technology while on the campus of Joy Kids Learning Center.

Usage: The tablet is to be used in the classroom as a supplement to the curriculum and theme that children are exploring. Only websites approved by the owners/directors are available for the students to go to, all others are blocked. This is addressed further under security. The tablet will be used to learn more about a subject from a website, e.g. look up Polar Bears during a unit on animals, to play installed "learning games" that develop and encourage children's knowledge, and to listen to music or books that directly relate to the theme the class is exploring. Children will not be permitted to use the tablet for more than 10 - 15 minutes per day and no more than 3 days per week.

Joy Kids Learning Center does not use a television for viewing at any time. Occasionally the children have a special day and watch a movie. Movies are rated G or PG and the teachers let the parents know what movie is being watched and ask for permission from the parents/guardians before showing the movie.

Photos/Videos: Students are not permitted to take pictures or videos without teacher permission

Apps: Preloaded apps may not be deleted. Children may not purchase new apps.

Web Access: Joy Kids Learning Center provides children (supervised) access to the internet. Children are not permitted to web browse.

Security: The iPad settings have been set to only allow children to go to appropriate websites. The following approved websites are allowed:

- ♦ Discover Kid, Disney, HowStuffWorks, National Geographic - Kids, PBS Kids, Scholastic.com, Smithsonian Institution, Time for Kids, Yahoo! Kids, Investigator Club.

This list may change as needed

Joy Kids Learning Center, LLC will not be responsible, financially or otherwise, for unauthorized transactions conducted over the school network.

Violations of Acceptable Use Policy: Violations of this *Acceptable Use Policy* will have disciplinary repercussions including but not limited to:

Suspension of network, technology, tablet or computer privileges.

JOY KIDS LEARNING CENTER, LLC RESERVES THE RIGHT TO REVISE, ADD, DELETE AND EXTEND AND OF THE POLICIES AND PROCEDURES PERTAINING TO THE TABLET AND ITS USE AT ANY TIME.

Positive Behavioral Practices Policy

At Joy Kids Learning Center we take many steps to build positive relationships with the children and families in our program. For example, we greet all children and families as they arrive each day, we keep a line of communication open with families by using casual conversation, conferences, emails and our app and we host family activities like field trips, a Thanksgiving Feast and a Christmas program.

It is important that the children are a part of the process for developing the rules and expectations in each classroom. Teachers incorporate rules & expectations into their lessons at the start of each school year, so that the children develop their classroom's list of rules. Additionally, the rules & expectations are reviewed, discussed, and sometimes modified with the children on an ongoing basis, daily in some classes and weekly at a minimum. We use a variety of strategies to encourage children's positive behaviors and help them avoid negative behavior such as clearly stating the rules and expectations, modeling positive & effective ways to express their feelings and emotions, supporting reflection, problem solving & negotiation between children and redirecting children toward positive behavior.

Providing Choices

The children have multiple opportunities to make choices on their own throughout the day. There are several blocks of time throughout the day that are "child guided play" times, when children go to the center or activity that interests them. Outside on the playground the children choose where and what they play.

We offer children choices to encourage positive behaviors. Offering a child two "good" choices helps them to learn to choose a positive behavior over a negative one. For example, a child may be having difficulty choosing a center to play in or the one she wants to play in is full. Saying to her "this center is full, but you can play with playdoh at the table or you can play in Home Living" helps her make a positive choice.


Redirection

At Joy Kids Learning Center we use verbal redirection to guide children to more appropriate activities or choices. A teacher may say to a child "I see that center is full. Let's find another center where there is space for another friend."

Teachers use "When-then" and "first-then" to help redirect children having difficulty finishing a required task before moving on to their choice of activity. An example would be to say, "first you put on your shoes, then you can choose a center to play in".

We use physical redirection mostly with the younger children who more frequently need a gentle touch to interrupt the negative behavior.

A two-year-old may be trying to pull a toy out of another child's hands. A teacher would touch the child on their shoulder and then take their hands and lead them away to a different toy or activity while saying "we share our toys at school. Joey is having a turn and when he is done it can be your turn. Let's play with crayons while you wait".



We use redirection with attention to help all the children recognize a positive behavior and encourage them to choose the positive behavior.

A teacher might say " I like the way Sabrina and DeShawn are sitting on the rug ready for story time."

Reflection and Problem Solving

Joy Kids Learning Center staff encourage children to solve problems together and/or with adult help. At the lunch table it is not unusual to see one child helping another to open the packaging on their food. Often children need a little encouragement and/or modeling from adults to move to the next step in problem solving.

We help children to use reflection as a way to solve problems and resolve conflicts. Teachers in our classrooms guide and support children in learning to solve problems by asking them to stop and state what the problem is, discuss how they think it can be fixed or what are possible solutions and invite other children to help solve the problem with them.

The teacher will continue to guide the child to try the solution they choose and then check back with the child to see if their solution worked.

Clear Rules and Expectations

At Joy Kids Learning Center we establish boundaries & rules to reassure that young children are safe and have order and stability while allowing and encouraging creativity and exploration.

Each classroom creates their own list of positive rules at the start of the school year. Positive rules reflect what the children may do in the classroom.

Having a list of positive rules supports the children in making positive choices, e.g. "I take turns, or I use walking feet."

Our program's rules and expectations for positive behavior are supported and reinforced in the following ways:

- Rules are written clearly using positive language, e.g. "we share our toys."
- Visual cues (pictures) are posted with the rules
- Limited number of rules. Younger classes have fewer rules
- Staff model and reinforce rules consistently
- Rules are reviewed and discussed with the children regularly

Sample Daily Preschool Schedule*

7:00-8:00 AM	Arrival, breakfast, quiet centers
8:00 – 8:15 AM	clean up - children move to separate classrooms
8:15 – 8:30 AM	Table top activities
8:30 – 9:00 AM	Gross Motor play outside (inside games, dancing for bad weather)
9:00 – 9:15 AM	Circle Time (whole group)
9:15 – 9:45 AM	Small groups (rotate at tables), centers, diapering
9:45 – 10:00AM	Clean up, Tub time, Potty/wash hands
10:00 – 10:15 AM	Snack
10:15- 10:30 AM	Preparation for outdoor play **cold/inclement weather – finger plays/songs
10:30 – 11:00 AM	Gross motor play – outdoors as weather permits
11:00 – 11:30 AM	Special daily activities: Monday – fun activities; art, cooking, science Tuesday – fun activities: art, dancing, etc. Wednesday – Chapel, Bible story Thursday – Jump Bunch Friday – Music For Life
11:30- 11:45 AM	Wash hands, story time
11:45AM – 12:30 PM	Lunch, potty, prep for nap time
12:30 – 12:45PM	Books on cots
12:45 – 3:00 PM	Nap
3:00 – 3:30 PM	bathroom/ snack
3:30 – 4:00PM	Center time
4:00 – 5:00 PM	Gross motor play outside weather permitting
5:00 – 6:00 PM	Table top games/ end of day

* This is the schedule for one classroom. Schedules for other classes may vary slightly

Acknowledgement of Receipt

Joy Kids Learning Center Parent Handbook 2025

I, _____, have received a copy of
Name of parent
the handbook for my child _____
Name of child
for Joy Kids Learning Center, LLC.

Parent Signature

Date



20 Mayo Road suite 203
Edgewater, Maryland 21037

Phone: 443.837.6001

Email: info@joykidslearning.com
www.joykidslearning.com

Photo and Video Release

The undersigned hereby gives Joy Kids Learning Center LLC, located at 20 Mayo Road, Suite 203, Edgewater, MD 21037, its legal representative, successors and assigns, and all persons and corporations acting with its permission or upon its authority, or for whom it is acting, the absolute right and unrestricted permission to take, copyright, use and publish photographs and/or video tapes of, or concerning the child of the undersigned for any purpose Joy Kids Learning Center deems desirable.

The undersigned accordingly, releases, discharges, and agrees to hold harmless Joy Kids Learning Center, its legal representative, successors and assigns, and all persons or corporations for whom it is acting, from any liability for, or arising out of taking, copyrighting, using and publishing photographs or videotapes of the child of the undersigned for any purpose Joy Kids Learning Center deems desirable.

In witness whereof, the undersigned has executed this agreement:

Day _____ Month _____ Year _____

Parent/Guardian's signature _____

Please Print

Name _____

Home Address _____

City, State, Zip _____

☐ I do not give permission for Joy Kids to use pictures or videos of my child/children.



20 Mayo Road Suite 203
Edgewater, Maryland 21037
Phone: 443.837.6001
Email: info@joykidslearning.com
www.joykidslearning.com

Joy Kids Learning Center understands that the first five years of a child's life are very important and we are committed to ensuring your child gets the best possible Early Childhood Education. To that end we screen each child upon entrance to our Center using the Ages and Stages Questionnaires Third Edition (ASQ-3™) www.brookespublishing.com. Additionally throughout the year we use Teaching Strategies Gold to assess your child's development, www.teachingstrategies.com.

I _____ give permission for Joy Kids Learning
Parent/guardian name
Center to screen my child _____ using the ASQ-3™. I also
Child's name
give permission to Joy Kids Learning Center to assess my child's development using Teaching
strategies Gold.

Parent/guardian signature

Date



20 Mayo Road Suite 203
Edgewater, Maryland 21037
Phone: 443.837.6001
Email: info@joykidslearning.com
www.joykidslearning.com

Topical Ointment Permission

I _____, give permission for Joy Kids Learning Center
(Parent/guardian name)

to apply _____, _____, _____,
(Diaper ointment) (Sunscreen) (Insect repellent)

_____, to my child _____ as
(Other) (Child's name)

needed.

I will send in the ointment/lotion with my child's name on it to be kept at the center.

Parent/guardian signature Date