



WEST CARROLL HEALTH SYSTEMS *DAY CARE RULES*

West Carroll Health Systems is pleased to be able to offer quality day care services to our employees free of charge. We want you to be confident that your child is in a safe, well organized environment where they can have fun and learn as well.

The Day Care Coordinator is responsible for day-to-day day care functions. If you have any questions, please feel free to see her at daycare. Please do not contact her after hours except in emergency situations.

Please be aware of the following:

- This is a benefit for WCHS employees. This service is provided for the children of employees. No grandchildren, nieces, nephews, etc. will be accepted into the day care program. If you feel that you have a special circumstance, please talk to the coordinator about this prior to dropping off the child. Please do not address problems with the day care workers. Speak to the coordinator. Any abuse of workers, including yelling, cursing, threatening behavior, etc. will result in your child being dismissed from the program, as well as possible employment disciplinary action.
- Your schedule is required, so that day care can know when to expect your child. However, we know emergencies arise. Should it be necessary to drop your child off unexpectedly, please get approval from the *day care coordinator* PRIOR TO dropping off.
- We do not give medicine at day care. No exceptions! If your child needs medication, please make arrangements with your department head to take your break around medication times.
- If your child has a temperature or has a gastrointestinal upset, please do not bring them to day care until they are 24 hours fever free and/or gastrointestinal symptoms have resolved.
- Should it be necessary to contact the parent, the daycare coordinator will contact the department in which the parent works. As employees are not allowed to have their cell phones, the cell phone number will not be used.
- We will have a form for the parent to sign should behavior problems occur. Please cooperate with day care employees to make sure each child behaves appropriately. Repeated, unimproved behavior problems may prohibit us from caring for your child. Of course, learning correct behaviors is part of growing up, so we are not expecting perfection. However, when you are asked to sign this form, please discuss these problems with your child. If you take these problems seriously, your child will too.
- Employees must come inside day care to drop off and pick up their child, as there is a sign in/out sheet. This is mandatory. You or the designated person picking up your child must sign your child in/out.
- Please let us know who may drop off, and more importantly, pick up your child, in writing on the designated form. If this changes, it is your responsibility to give daycare a new registration form. This cannot be a verbal request.
- Please let us know if your schedule changes. For instance, if you are planning to go on vacation, please let day care personnel know so that they can plan accordingly. Failure to communicate with daycare on these issues will result in us being unable to care for your child.

- The children are not allowed to use cell phones at day care. If your child has a phone, it will be placed in their backpack.
- We will be happy to care for your child on the days that you are working. If you are off from work, you cannot drop your child at day care. Please pick up your child after your shift ends.

Employee: _____

Date: _____

**WEST CARROLL HEALTH SYSTEMS
DAY CARE REGISTRATION FORM**

For any questions, please see the day care coordinator.

CHILD'S LEGAL FULL NAME:	DOB:
NAME CHILD IS CALLED:	SEX:
TIME/DAY CHILD CARE IS NEEDED:	
PARENT:	DEPARTMENT:
WORK TELEPHONE:	
CELL NUMBER:	
FOOD ALLERGIES:	NORMAL WORK SHIFT:
THE FOLLOWING PERSONS HAVE PERMISSION TO PICKUP/DROP OFF MY CHILD:	RELATIONSHIP:

I hereby acknowledge that I have been given the *Day Care Rules* and agree to abide by these rules. I understand that the daycare coordinator is to be contacted with any questions or concerns. Please do not contact after 7PM.

Parent Signature

Date

Printed Name