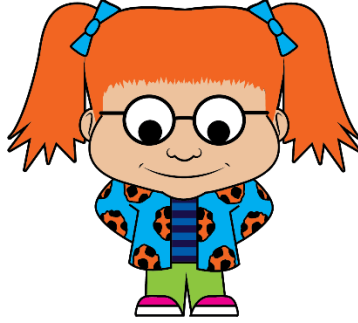


**Smart
Cookies**
Early Childhood
Center

1717 Savannah Highway
Charleston, SC 29407
(843) 852-2242

**Parent
Handbook**



**Smart
Cookies**
Early Childhood
Center

1717 Savannah Highway
Charleston, SC 29407
(843) 852-2242

Dear Parents,

Thank you for your interest in Smart Cookies Early Childhood Center. Here is the information you requested. This parent handbook outlines our program, policies, and procedures. It also includes all the forms necessary for enrollment. Please feel free to contact us at any time. We look forward to meeting you.

Sincerely,

Deborah Reid
Director

FINGERTIP FACTS

LOCATION:

Smart Cookies Early Childhood Center

1717 Savannah Hwy
Charleston, SC 29407

Phone: (843)852-2242

Smart Cookies Preschool

1643 Savannah Hwy
Charleston, SC 29407

Phone: (843)793-3247

E-MAIL: www.SmartCookiesSC@gmail.com

Website: www.SmartCookiesSC.com

DIRECTOR: Deborah Reid www.smart_cookies@yahoo.com

EXECUTIVE DIRECTOR: Paula Moland

HOURS: Monday – Friday, 6:30am - 6:00pm

SCHOOL CLOSINGS FOR 2024

Monday, January 1 st	New Years Day
Monday, January 15	Martin Luther King Day
Monday, February 19	President's Day
Monday, May 27	Memorial Day
Wednesday, June 19	Juneteenth
Thursday, July 4 th and Friday, July 5 th	Independence Day
Monday, September 2 nd	Labor Day
Monday, October 14 th	Columbus Day
Thursday, November 28 and Friday November 29	Thanksgiving
Tuesday, Dec 24, Wednesday, Dec 25, Thursday Dec 26	Christmas

2024 PROGRAMS AND RATES

Full-time: Monday – Friday 6:30 am – 6:00 pm

Infants	(6 weeks – 12 months)	\$305 weekly
Woddlers	(13 months – 24 months)	\$285 weekly
Toddler 1 & 2	(25 months – 36 months)	\$285 weekly
Pre-K 3's	(37 months and up)	\$275 weekly

Part-time: 6:30 a.m.-6:00 p.m. Available for 3's and up only

M/W/F	\$190 weekly
T/TH	\$150 weekly

Late Fees are \$15.00 per 15 mins after 6:15 p.m.

Tuition is based on an annual rate and is still charged in the event of short term mandated closures.

ABOUT OUR PROGRAMS

Thank you for your interest in Smart Cookies Early Childhood Center. The primary objective of our school is to help each child develop a sense of self-esteem and enthusiasm for learning. Every child is encouraged to discover their individual talents and take pride in personal achievements. Through positive reinforcement, small group activities, and creative expression, we build a foundation for a lifetime of learning with your child. Our program is designed to encourage characteristics such as self-confidence, curiosity, persistence, initiative and the ability to focus.

At Smart Cookies, we know the importance of building trusting relationships between children, their peers, and adults. Our staff is trained to give each child plenty of individual attention. Our program aims to meet the needs of each child's individual age and development level. Our goal is for each child to grow to their full potential at their own pace in a fun, loving, organized, and stimulating environment.

AGE GROUPS

INFANT ROOM (6 weeks to approximately 10-12 months)

At Smart Cookies, our caregivers focus on primary caregiving. We work to help every child build a sense of security and lay a foundation for the development of confidence and trust. We work closely with the parents to customize a daily routine that will fit the family's needs. Our staff is educated and trained in infant development and we provide a stimulating, safe, and secure environment to encourage the infants to explore and trust their caregivers.

WODDLERS (approximately 10-12 months to 18 months)

In this age group, we encourage the children to explore the world around them. Activities are child initiated. Our caregivers act as facilitators for the children as they give support and guidance. The activities offered for this age group are for manipulation and exploration. Materials in the rooms will be rotated often, as the interests of the children change. A stimulating environment is created to nurture curiosity and motivate each child. Parents receive weekly lesson plans to gain insight into what key concepts are being introduced.

TODDLER 1 (approximately 18 months to 2.5 years)

Short group activities are essential for this group. We build upon their interest and share the joy of uncovering the pleasures of everyday life. Your child will be surrounded with meaningful language to enhance the learning value of each new experience. Your child will be given the tools to experiment with newly acquired abilities. They will discover that they can make things happen. This increased awareness occurs while the children are enjoying sand play, water play, toy riding, shape sorting, block building, kitchen play, ball bouncing, and many other activities.

TODDLER II (approximately 2.5 to 3 years)

At this age, children are beginning to develop special friendships. They will learn to interact with their peers. Group activities are extended and academic introduction will begin to take place. Activities are modified according to each child's own individual creativity and self-expression. This age group will continue to enjoy many of the same activities mentioned earlier. Potty training is also part of the classroom. We will work with parents and children to conquer potty training in a nurturing, safe, and positive way.

PRE-K 3's (approximately 3 to 4 years)

Social development is very important at this age. Children are developing stronger relationships and learn how to treat each other. Sharing, caring, helping, manners, and healthy habits are some of the concepts the children practice. Using words to express emotion is a main focus in the class. The children learn to verbalize feelings and ask for what they want. Sitting during circle time, paying attention at story time, listening to each other speak and practicing patience, help prepare the children for a structured school day. In addition to social skills, the children practice writing, numbers, sensory play art and dramatic play (just to name a few!).

PRE-K 4's (approximately 4 to 5 years)

Kindergarten preparation is emphasized at this age level. The teacher prepares lessons geared toward reading readiness skills and self-expression. The children are offered a variety of activities to enhance social development, as well as pre-math and pre-reading skills. Children will build a strong academic foundation through structured learning and carefully planned curriculum.

AREAS OF LEARNING

The following areas are implemented in each classroom, specific to their age group and are included in all of our pre-school programs.

Reading Readiness: Oral language development; readiness for books, discrimination of sounds; repeating a pattern; discrimination of letters; ability to recognize printed name; building a sight vocabulary; ability to recognize rhyming words; ability to retell stories and past experiences; and most importantly, the discovery that reading can be a great source of pleasure and fun.

Math Readiness: Concepts of big and small, few and many, more than and less than; basic numbers 1-10 and 1-100; telephone numbers; addresses; patterns; simple computers; geometric shapes; and measuring. A variety of learning activities are provided to make learning more fun.

Art: Primary and secondary colors; cutting, pasting, and gluing; painting with different kinds of media and textures; weaving; paper mache; mobiles; holiday projects; seasonal themes and personal creations. Not only is art a lot of fun, it also promotes visual motor coordination.

Science: Lessons consist of a variety of simple experiments and experiences. Science involves investigating, listening and manipulating. Asking questions and interacting are encouraged. The children will be introduced to animals, plants, planets, the change of seasons, the five senses, night and day and much more. The opportunities are endless.

Practical Life: The children are introduced to a variety of tasks often performed in everyday life. They include folding a blanket, setting a table, washing dishes, pouring water, washing hands, buttoning, snapping, tying, and buckling. Our curriculum also includes stranger danger, telephone manners, emotions, safety rules and community helpers. Dress up clothes, dolls, trucks, dinosaurs, tools, animals and tents (among so many other things) are used to enhance imaginative play.

POLICIES

ARRIVAL AND DEPARTURE: Upon arrival, parent shall accompany all children from the car into the school and upon departure, from the school to the car. **Please do not leave children unattended in your car or the parking lot area.** Children will be released only to persons authorized by parents (they will be asked to provide picture I.D.). If you must send someone to pick up your child that is not on our approval list, we must be notified in writing or your child will not be released to that person.

ARRIVAL TIME: Though we have no strict policy regarding drop-off time, it helps if children can be dropped off by 9:00 am, when possible, to limit interruption to our daily programs. Transition time during drop-off and pick-up time can be difficult. **Please maintain a short routine** with your child during those times to ensure an easier time for all involved.

ABSENCES AND LATE ARRIVALS: Please call our office by 8:00 am if it is necessary for you to arrive late in the morning or if your child will not be attending school on that day. If you will be taking the day off from work or at a different location for the day, please let the front office know how you can be reached in case of emergency. Please also notify the front office if your child will be on vacation.

*Please make sure to update your child's records with the office anytime information may change. This includes work location, phone numbers, emergency contacts etc.

BEHAVIOR MANAGEMENT: Discipline will be provided through a combination of positive reinforcement and redirection. It is expected that we work together to alter negative behavior. Emphasis will be placed on recognizing positive behavior by showing love and encouragement. Positive reinforcement emphasizes what the child *should* be doing and teaches self-esteem. **Corporal punishment is not allowed.**

LUNCH AND SNACKS: Parents are asked to provide lunch and snacks daily for children. Please consult the director or your child's teacher regarding meal times. Some parents prefer to send snacks in daily, while others bring in bulk snacks twice a month.

Please note: All utensils, food and beverage containers will be sent home rinsed, but not sterilized.

Due to many children with food allergies, please **do not send in lunches and/or snacks containing peanut butter.

***For children in the Infant Room, please make sure that there is extra food (formula or baby food) in case of delayed pick-up. Also, please make sure all new food items are tried at home at least 3 days before sending it to school in case of allergies.

VERY IMPORTANT- Please label all bottles, covers, dishes of food, etc. Please write out a detailed schedule of your child's feeding and sleeping times, so that we may help you maintain an established routine.

NAPS AND QUIET TIME: Parents are asked to bring in 2 crib sheets and a blanket in a laundry bag or pillow case all labeled. Please do not bring in loose items. Parents are responsible for taking home their child's bedding at the end of their scheduled week for laundering. Our naps and quiet time will be held in the early afternoon. Infant nap times will be scheduled according to the child's needs and individual schedules.

PARENT/TEACHER COMMUNICATION: Report and sheets are filled out daily for all children. We send most information via e-mail.

TRACKING CHILDREN: Parents are to sign their children in and out of the facility. Teachers track the children throughout the day recording counts on a spreadsheet every hour, as well as their times in and out of the classroom.

CHILD RECORDS/CONFIDENTIALITY: Smart Cookies keeps a file cabinet in the office and a separate record is kept for each child. The file is kept in a confidential manner, but shall be immediately available to the Department, the child's teacher/caregiver, parent, or guardian upon request.

PARENT ACCESS AND COMMUNICATION: Smart Cookies shall permit the parent of a child in care free and full access to his or her child without prior notice, while their child is receiving care, unless there is a court order limiting parental access. This free access must not disrupt instructional activities and classroom routines.

DIAPERS AND POTTY TRAINING: If your child wears diapers, please send a supply of disposable diapers, baby wipes and whatever cream or powder you prefer. For sanitary reasons, we cannot use cloth diapers. Teachers will notify you when your diaper supply is low, and please make sure you label all packages. We request wipes twice a month to keep a constant supply available. We will assist you in potty-training your child if you request, while you reinforce it at home. During this time, we will need a number of extra changes of clothes.

CLOTHING: Please provide 2 complete and seasonally appropriate set of clothes for each child in case they get soiled and uncomfortable. This includes socks. Be sure to label each item. For younger children we recommend you send in a minimum of 2 bibs daily and keep

several changes of clothing in their cubbies. During the hot summer months, please send in sun block and hats. **For safety purposes, please send children in close toed shoes.**

TOYS: Toys are furnished for all children. For safety reasons, we do not allow children to bring toys from home. Smart Cookies is not responsible for any toys from home. However, the children may bring a special teddy bear or blanket to sleep with. Remember to label it! (*Infants may not have any items other than a crib blanket in their crib per DSS licensing law).

SHOTS & VACCINATIONS: If at all possible, when it is time for your child to get their shots or vaccinations, we would appreciate it if you would schedule them on Friday afternoons. Frequently children react to these visits and do not feel well afterwards. During these times they may need mom or dad to comfort them. **When your child does receive immunizations, please submit a copy of the updated immunization records to the front office.**

SICK DAYS & VACATIONS: Tuition is considered an annual tuition, as in most preschool and childcare centers. If your child is sick or does not attend for another reason, full tuition payment is still required. This includes vacation time and days when we may have to close for serious weather. (Please note: we make every reasonable effort to remain open.)

TRANSPORTATION POLICY: We do not off-site transportation or off-site field trips.

PROVISIONAL EMPLOYMENT: This facility may provisionally employ a person in order to comply with SC laws when unexpected staff vacancies occur

RATES AND PAYMENTS*: Our rate is year-round tuition, which is broken down into weekly rates, and guarantees your child a year-round spot. This rate is subject to change upon 30-day notice. Payment is drafted from your checking account or credit card through Tuition Express on 25th of the preceding month. Bills are available by the 21st of the preceding month. The amount due is the weekly tuition times the number of Mondays in the upcoming month. (i.e. If your weekly tuition is \$235, and there are 5 Mondays in the month, tuition would be 1175. If there are 4 Mondays, it would be \$940 for that month). Alternate payment plans available on request.

A \$35 fee will be charged for insufficient funds. If a payment is received after the 5th day of any month, an additional 10% service charge will be assessed and due along with tuition.

HOURS: Our regularly scheduled hours are Monday - Friday, 6:30am-6pm. Late fees will be assessed at the rate of \$1.00 per minute after 6:15pm. Please call if you will be delayed.

CLOSING FOR SEVERE WEATHER: Every effort will be made to remain open on all regularly scheduled days. However, if we are forced to close due to dangerous weather conditions, or other unforeseen acts of Mother Nature, there will be a recorded message on the regular school telephone number 843-852-2242 informing callers of the details.

ILLNESS: Please inform us if your child has been ill during the night or is not feeling well upon arrival. For the protection of all children in our care, we reserve the right to restrict the attendance of a child who is obviously ill. If a child has a communicable disease, which is not physically evident, it is the responsibility of the parent to inform the day care provider of the disease or illness. Parents will be notified if their child becomes ill during the day and at the discretion of the childcare provider a parent may be asked to pick up their child as soon as possible. **A child with a fever of 100.3 and higher must be sent home and cannot return until they are fever free for 24 hours (without the aid of any medication).** Considering this possibility, it may help your work attendance if you have pre-arranged backup care for those times. Please understand that State Child Care Rules and Regulations prohibit a childcare provider from giving medicines (including aspirins, cough syrup or drops) to a child, unless that childcare provider has written permission from the child's doctor. (A prescription from the child's doctor with a pharmacy's label on the medicine bottle which includes doctors name, the child's name, dosage instructions and a recent filling date will be acceptable.)

MEDICATIONS: If it is necessary to administer medication to your child, you must fill out the medication form in your child's classroom or the office.

EMERGENCY: A "medical emergency treatment permission form" is provided for your signature, authorizing us to call for proper qualified medical assistance in the event of an emergency. In the case of such an incident, we will contact the hospital or rescue squad immediately, the child's doctor and the parents, as soon as possible, in that order.

TERMINATION OR PARTIAL CHANGE IN THE CONTRACT: A written notice of thirty days in advance of termination or any changes in contract must be presented to the director of Smart Cookies. In lieu of notice, the fee for the thirty days must be paid upon termination and your deposit will not be applied to any amount due.

****PLEASE NOTE:** Termination of a signed contract prior to a child's schedule start date will result in loss of deposit.

We reserve the right to terminate this contract with seven-day notice. If this is necessary, deposit money minus any fees incurred prior to the termination date will be returned to the parents.

SUMMARY: We will give your child loving and instructive care and provide surroundings conducive to his or her physical, social and emotional needs. We all want the best tender loving care for your child, so it is important that we keep the lines of communication open..

ENRICHMENT PROGRAMS

We also offer the following programs to enhance your child's learning and fun here at Smart Cookies Early Childhood Center.

Spanish - Our resident Spanish teacher is Senora Gladys Labarca. A native of Santiago, Chile, she is married and has 2 grown children. Her daughter resides in Chicago and her son and his family reside on Daniel Island. She is the grandmother of 2 boys, one 14 years old and the other 11. She has been in the USA her entire life and graduated from Drexel University. She has been teaching Spanish to early childhood children for 30 years. The objective in every class is to have your children actively participate in the Spanish language. Ages 2 and up; offered every Wednesday. Through her Spanish teaching, the children will learn day-to-day experiences expressed and presented in the Spanish language.

All above enrichment programs are included with tuition.

Optional programs (additional fee)

Ask about our optional programs:

Dance Express

Soccer Shots

PHILOSOPHY OF CHILD DISCIPLINE

"...To train or develop by instruction, especially in self-control"

- Webster new Collegiate Dictionary.

It is the philosophy of the center to help children grow emotionally as well as intellectually, to help children succeed, feel good about themselves and be able to express their feelings in a positive and constructive manner.

It is our policy that discipline be positive. Discipline is not punishment. It is a way of helping children learn to identify socially acceptable behavior.

Within our center, limits and rules are clearly defined, consistent and in accord with the appropriate development and age of each child and the program in general. We focus strongly on reinforcing acceptable behavior and preventing undesirable behavior by being responsive to the needs of the children.

Methods of correcting inappropriate behavior within the center consist of the following:

- 1) Re-direction of activities to change the focus of a child's behavior
- 2) Individualized attention to help the child deal with a particular situation.
- 3) Time-away by removing a child for a few minutes from the area or activity so that he/she may gain self-control.
- 4) "Catch the child being good." We respond to and reinforce positive behavior; we acknowledge or praise to let the child know we approve of what he/she is doing.

Discipline shall not be isolation without supervision, nor withholding food or attention. No child shall be subjected to corporal punishment, emotional neglect, abusive language, ridicule, or any behavior that shall intimidate, frighten, or endanger a child, or his/her self-image.



Child Information Form

Child's Full Name: _____

_____ (first) _____ (middle) _____ (last) _____ (nickname)
Home Address: _____ City: _____
State: _____ Zip Code: _____ Age: _____ Gender: _____ Birthday: _____

Mother's Name: _____ Employer: _____
Home Address: _____ City: _____
State: _____ Zip Code: _____ Mother's Email Address: _____
Home#: _____ Work#: _____ Cell#: _____

Father's Name: _____ Employer: _____
Home Address: _____ City: _____
State: _____ Zip Code: _____ Father's Email Address: _____
Home#: _____ Work#: _____ Cell#: _____

Marital Status of Parents/Guardians: **MARRIED** **DIVORCED** **SEPARATED** **OTHER**

Previous School Attended (if any): _____

EMERGENCY CONTACT: TWO PEOPLE MUST BE LISTED (These people will assume responsibility for your child in an emergency if we are unable to contact the parents):

Name: _____ Relation: _____
Home Address: _____ City: _____
State: _____ Zip Code: _____
Home#: _____ Work#: _____ Cell#: _____

Name: _____ Relation: _____
Home Address: _____ City: _____
State: _____ Zip Code: _____
Home#: _____ Work#: _____ Cell#: _____

Permission is granted to meet the needs of my child in case of an emergency: (Please sign below)

Parent Signature: _____

Please indicate below how your child will be attending our center: (Check all that apply)

- **Full-time:** All children can attend the center at a full-time status. **Please note, this is the ONLY option for children enrolled in Infant through age 3.**
 - **M/W/F Part-time:** Available for children ages three and up only.
 - **T/TH Part-time:** Available for children ages three and up only.

For Office Use Only:

Date of Enrollment: _____

Registration Fee Total: \$ _____ Paid by: Cash Check CC

Receipt or check #: _____



Authorized to Pick Up Form

Child's Name: _____

Persons authorized to pick-up my child (**They will need to provide a picture ID when picking up**):

Name: _____ Relation: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____

Home#: _____ Work#: _____ Cell#: _____

Name: _____ Relation: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____

Home#: _____ Work#: _____ Cell#: _____

Name: _____ Relation: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____

Home#: _____ Work#: _____ Cell#: _____

Name: _____ Relation: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____

Home#: _____ Work#: _____ Cell#: _____

Name: _____ Relation: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____

Home#: _____ Work#: _____ Cell#: _____

Name: _____ Relation: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____

Home#: _____ Work#: _____ Cell#: _____

Signature of Parent/Legal Guardian

Date



Diaper Cream & Bug Spray Authorization

I give Smart Cookies Early Childhood Center permission to apply the following to my child

_____.
Child's name

Diaper Ointment (please provide): _____

Any known adverse reactions _____

Parental Instructions _____

Bug Spray (please provide): _____

Any known adverse reactions _____

Parental Instructions _____

Parent Signature

Date



Discipline & Medicine Policy

Discipline Policy

Since discipline involves teaching children appropriate behaviors, the primary method of discipline used at Smart Cookies Early Childhood Center is positive guidance. All staff members will model appropriate behaviors, minimize the use of negatives and follow guidelines when working with all children.

1. Redirecting behavior or offering another activity.
2. Encouraging positive strategies.
3. Offering conflict resolution techniques, such as “we have a problem, what can we do about it?”
4. Reinforcing positive choices.
5. Individualized attention to help the child deal with a particular situation.
6. Time-away: removing child for a few minutes from the area/activity so they may gain self-control.
7. “Catch the child being good” we respond to and reinforce positive behavior; we acknowledge or praise to let the child know we approve of what he/she is doing.

The child will be taught obedience through positive reinforcement which will help/him/her to develop a healthy respect for self and others. The child will be guided to understand that even though his/her behavior was unacceptable, he/she is still loved and cared for. If deliberate disobedience continues, or the child is consistently disruptive or destructive, Smart Cookies Early Childhood Center reserves the right to disenroll a child who cannot respond to our discipline. However, our intent is always to work with parents for a successful outcome.

SMART COOKIES EARLY CHILDHOOD CENTER DOES NOT PERMIT CORPORAL PUNISHMENT. In addition, staff are prohibited from using the following methods of discipline: hitting, shaking, restricting a child’s movement, inflicting mental or emotional punishment, depriving a child of meals or snacks

Medicine Policy

We are not allowed to administer any prescription or non-prescription medication without written authorization from a parent and/or your child’s physician. A medicine permission slip is available in the office. This form must be signed, dated and have specific written instructions to include the name of the medication, time and amount to be given and reactions to watch for. All medication and medicine slips must be left in the office. **MEDICATION MAY NOT BE LEFT IN YOUR CHILD’S BOOK BAG/DIAPER BAG.**

Prescription Medication: All prescription medicine must have your child’s name on it, be in the original prescription bottle/box with the prescription label, and the medication must be current.

1. **Non-Prescription Medication:** Non-prescription medication can be administered with parental permission if your child falls within the medication age and weight guidelines clearly marked on the container. A note from your child’s physician is required for non-prescription medication that does not follow these guidelines.

I have read and understand the above discipline and medication policies.

Name of Parent/ Legal Guardian (please print)

Date

Signature of Parent/ Legal Guardian

Date



Emergency Medical Treatment Form

I/we _____ hereby give my/our permission to Smart Cookies Early Childhood Center to call a doctor or emergency squad for my/our child _____ should an emergency arise. It is understood that a conscientious effort will be made to locate me/us before medical action will be taken, but if this is NOT possible, the expenses of emergency medical care or treatment will be accepted by me/us.

_____ Name of Parent/ Legal Guardian (please print)	_____ Date
_____ Signature of Parent/ Legal Guardian	_____ Date
_____ Administrator's Signature	_____ Date



Photo Release Form

I grant Smart Cookies Early Childhood Center, its representatives and employees the right to take photographs and video of my child for promotional purposes. I authorize Smart Cookies Early Childhood Center, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Smart Cookies Early Childhood Center may use such photographs and video of my child for any lawful purpose, including publicity, illustration, advertising and social media.

Child's Name: _____

Name of Parent/ Legal Guardian (please print)

Date

Signature of Parent/ Legal Guardian

Date



Nut Free Policy

Smart Cookies Early Childhood Center strives to be a nut free environment. It is a policy that needs to be taken quite seriously because of its extremely dangerous consequences.

Nut allergies can be life threatening. It takes only the slightest smell, touch, or ingestion of peanuts, peanut butter, peanut oil, or a product that may contain traces of peanuts.

Our first priority is to ensure the safety of all children here at Smart Cookies Early Childhood center. As part of our nut free policy we ask that you keep in mind when sending lunches, snacks, treats for classroom parties or anything else that may require you to bring food for your child/children to school. Please read all labels of prepacked products when sending to school.

I understand that Smart Cookies Early Childhood Center is a Nut Free School and I will abide by all rules and guidelines.

Name of Parent/ Legal Guardian (please print)

Date

Signature of Parent/ Legal Guardian

Date



Contract

Child's Name: _____ Date of Birth: _____

Infant _____ Woddler _____ Toddler 1 _____ Toddler 2 _____ PK-1 (3 year olds) _____ PK-2 (4year olds) _____

Mother's Name: _____ Employer: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____ Mother's Email Address: _____

Home#: _____ Work#: _____ Cell#: _____

Father's Name: _____ Employer: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____ Father's Email Address: _____

Home#: _____ Work#: _____ Cell#: _____

I agree to enroll my child, _____ in Smart Cookies Early Childhood Center, located at 1717 Savannah Hwy, Charleston SC 29407 beginning _____. I have read the Parent's Handbook and agree to abide by the rules and regulations as stated. I agree to pay \$_____ per week for _____ days and understand that monthly tuition will be drafted from my account on the 25th of the month preceding the month care is provided. The amount due will be the weekly tuition times the number of Mondays in that month. I understand a deposit equal to one week's tuition \$_____ is due payable with this contract and will be applied towards the last week my child attends providing a 30-day written notice has been given by me to the school's director prior to termination. If this notice is not given, the deposit will be forfeited and tuition due for that 30-day period will remain due. In the event I decide not to enroll my child in Smart Cookies Early Childhood Center, after completion of this signed contract, I understand this deposit is non-refundable.

My contracted hours and days are as follows:

Days: M T W TH F

Anticipated Drop off time: _____

Anticipated Pick up time: _____

I understand the importance of keeping this schedule and realize that an additional late fee of \$1.00 per minute will be charged after 6:15 pm

Name of Parent/ Legal Guardian (please print)

Date

Signature of Parent/ Legal Guardian

Date



Automated Payment Processing Safe – Convenient – Easy

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR **BANK ACCOUNT** and **CREDIT CARD**

I (we) hereby authorize (business name) Smart Cookies Early Childhood Center to initiate credit card charges to the below-referenced credit card account (**Section A**) OR, initiate debit entries to my (our) checking or savings account, indicated below (**Section B**). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

COMPLETE ONE SECTION ONLY

SECTION A (Credit Card)

Cardholder Name		Phone #	
Cardholder Address	City	State	Zip
Account Number	Expiration Date		
Cardholder Signature	Date		

SECTION B (Bank Account)

Your Name		Phone #	
Address	City	State	Zip
Bank or Credit Union Name	Bank or Credit Union Address	City	State Zip
Routing Transit Number (see sample below)	Account Number (see sample below)	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Authorized Signature	Date		

For Official Use Only

Date Received

Employee Signature

John Sample Mary Sample 123 Nice Street Anytown, USA	BANK OF THE WEST 555-555-5555	00226
Pay to the order of	Attach Voided Check Here	\$
	Deposit slips not accepted	Dollars
12345678901	18003308*	0226
Routing Number	Account Number	Check Number

A service of



GENERAL RECORD AND STATEMENT OF CHILD'S HEALTH FOR ADMISSION TO CHILD CARE FACILITY

This form is to be completed for each child at the time of enrollment in the child care facility, updated as needed when changes occur, and maintained on file at the facility.

GENERAL INFORMATION: (to be completed by Parent or Guardian)

Name of Facility: _____ County: _____

Address: _____
Street Address – no Post Office Boxes City, State, Zip

Child's Name: _____
Last First Middle Initial Nick Name

Date of Birth: _____ Enrollment Date: _____

Child's Current Home Address: _____
Street Address City, State, Zip

Parent/Guardian's Full Name: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

Parent/Guardian's Full Name: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

You must have two individuals who have the authority to obtain emergency medical treatment for the child.

1. Person responsible if parent/guardian unavailable for emergency medical services:

Full Name Relationship
Address: _____
Street Address City, State, Zip
Telephone Number(s): _____ Family Code Word(s): _____

2. Person responsible if parent/guardian unavailable for emergency medical services:

Full Name Relationship
Address: _____
Street Address City, State, Zip
Telephone Number(s): _____ Family Code Word(s): _____

Is Child currently enrolled in school? (5K up to 6 years old) Yes No

My Child will regularly attend this facility **FROM** _____ am/pm **TO** _____ am/pm

If Child is a drop-in, indicate hours of care: **FROM** _____ am/pm **TO** _____ am/pm

Check all days Child will regularly attend this facility: Mon Tue Wed Thurs Fri Sat Sun

Check all meals Child will receive daily: Meals are not offered Breakfast Morning Snack Lunch
 Afternoon Snack Dinner Evening Snack

HEALTH INFORMATION: (to be completed by Parent or Guardian)

Family Physician or Health Resource: _____
Name

Street Address City, State, Zip Telephone

Emergency Care Provider: _____
Emergency Facility Name

Street Address City, State, Zip Telephone

Dental Care Provider: _____
Name

Street Address City, State, Zip Telephone

Health Insurance Provider: _____

Certificate of Immunization: Yes No N/A Please explain: _____

My child has the following health conditions such as allergies, asthma, diabetes, epilepsy, etc., and/or takes the following medications on a regular basis:

Additional Comments: _____

I certify that to the best of my knowledge _____
Child's Name

is in good mental and physical health and able to participate in the child care program at
Smart Cookies Early Childhood Center
Name of Child Care Facility

Signature: _____ Date: _____
Parent or Guardian

Signature: _____ Date: _____
Director/Operator/Staff Designee



lillie fuel



Smart Cookies has teamed up with @lilliefuel for lunch delivery



About lillie fuel:

- * Our meals exceed USDA nutritional requirements.
- * Menu is changed weekly.
- 100% peanut-free and all other allergy & restrictions are substituted for.
- * daily delivery to school
- ** Service starts 8/3

Ordering is easy, go online to lilliefuel.com

- * Click school lunches
- * Click your school
- * Select all that applies in drop down

* orders are due by 12pm on Fridays for the following weeks delivery