

Name of child: _____

Central Eglinton Children's Centre

Consents and Permissions

CODE OF CONDUCT

I understand that concerns I wish to communicate to CECC staff must be done in private, not in front of children or other parents. If I have spoken with a member of staff and feel my concerns are not being heard, I agree to notify the Director.

If I have a concern regarding a situation that includes other children or their parents/guardians, I agree to speak directly with a staff member, not with the children involved or with their parents/guardians.

I understand that abuse of staff, children or other adults, will not be tolerated, including any form of threat, shouting, accusation or intimidation. I understand that if I am in contravention of this policy, in accordance with CECC's Suspension and Withdrawal Policy and under careful consideration by CECC's Board of Directors, it may be cause for withdrawal from the Centre. If this happens, I understand that my child may remain in care for the four week notice of withdrawal period, but I will have to find another person to pick up and drop off. Remaining fees will be reimbursed on my child's last day.

I understand that I am responsible to ensure that all the individuals who drop off/pick up my child are aware of this policy and adhere to it.

INFORMATION GATHERING/SHARING

Privacy Policy

I understand if there are concerns regarding potential or suspected breaches of my privacy, I will contact the director/assistant director, or when necessary CECC's Privacy Officer, at privacy.cecc@rogers.com.

I understand no private or personal information about me or my child will be disclosed to any other authority without my permission, unless by legislation or court order.

Sharing Information with Governing Bodies

*The Freedom of Information and Protection of Privacy Act (FIPPA) Federal
Personal Information Protection and Electronic Documents Act (PIPEDA) Provincial*

During their annual visits, representatives of The City of Toronto and the Province of Ontario, may randomly check your child's file to ensure information on the application form includes start date, permission for emergency medical treatment, release information, excursion permission, permission to share information etc.

Anti-Spam Legislation Canada Anti-Spam Legislation (CASL)

I consent to receive email notices from CECC containing advertising of special events and fundraising ventures, etc. CECC will continue to send all other non-commercial information via email (as per Canada Anti-Spam Legislation).

Student Teacher Practicum

I understand that my/our child may be observed by student early childhood educators, from CECC's affiliated colleges. I understand the observations are kept in confidence and used only as a means to fulfill the students' course requirements.

Developmental Screens, etc.

I understand that CECC, as part of regular programming, will complete developmental screens and assessments. These records will be included in my child's file.

Name of child: _____

Child’s Image/Photographs, etc.

I understand that photographs/videos/recordings of my child are used regularly in the day to day operations of the Centre for:

- Play materials ex. Faces on blocks etc., Picture Bingo, etc.
- Displays and documentation of children’s play and learning
- Emergency information Sheets kept in each classroom’s backpack
- Class momentos distributed to all children: Class photos, class books, etc.

I understand that I may not take photographs/videos/recordings etc. of any children, including my own, while they are at CECC – classroom, playground, field trips, common areas, etc

Storypark

CECC’s staff team communicate children’s learning through the **Storypark** app. <https://www.storypark.com/ca/>

I will not share any content, videos, audio recordings, stories that feature or have been created by children other than my own, without the permission of those children’s parents and guardians.

I agree to act appropriately and not post inappropriate content to **Storypark**.

I give permission for CECC to create and use a profile for my child. I understand that my child's details and work, as well as photos, videos and audio recordings in which he/she is depicted may be included in **Storypark**. My child's profile will be linked to the account of CECC and will be accessible by our educators and staff for educational purposes.

YES _____ NO _____

My child may be depicted in 'group stories' that can be viewed by families or other children in the stories.

YES _____ NO _____

Sharing Information with Schools

Ongoing communication amongst all adults involved in your child’s day enhances their educational and care experiences. In order to best serve the needs of your child, there are times when it is appropriate and helpful for the School and the Child Care Centre to exchange information about the children participating in both programmes. The kind of information shared may include, but is not limited to, matters involving attendance, illness, transportation, or well-being.

Shared written information will be kept confidential and will be shared only during the time in which the child is enrolled in CECC, or upon the request of the parent.

In the event that it is necessary to refer to clinical records or Ontario Student Record (OSR) documents, you will be asked to sign the appropriate consent form before such information is disclosed. Your consent will give permission for the exchange of information between the School and CECC.

Initial for consent

Name of child: _____

PAYMENT/FINANCES**Fees/Payment and Deposits****Deposit**

I understand that except for the Summer Programme, a security deposit is payable upon registration and will be held in CECC's non-interest-bearing account. It will be returned to me when I provide proper notice of withdrawal.

Families in receipt of a childcare fee subsidy from the City of Toronto are not required to provide a deposit.

Fees/Payments

I understand that monthly fees will be withdrawn from my account through a direct debit on the 1st of the month, or the closest business day. The withdrawals will be processed by the TD- Canada Trust bank.

Withdrawal**Families attending CECC for more than three months:**

I understand to withdraw from CECC without penalty, I must give one full month's written notice. If insufficient notice is given, I will forfeit my full deposit. On my child's last day, I will receive the deposit, but if I have outstanding fees, they will be deducted from my refund.

Families attending CECC for fewer than 3 months:

I understand one month's written notice is required to withdraw from CECC. On my child's last day, I will receive my deposit, minus a \$100 administration charge. If I have outstanding fees, they will be deducted from my deposit.

Absence

I understand there will be no reimbursement of fees if my child is absent due to illness or vacation.

Childcare Fee Subsidy Arrangement

I understand that my child may not be absent from CECC for more than 35 days in a calendar year. I understand that I may not take more than 20 days consecutively and that I am responsible to pay my assessed daily fee even when my child is absent. I agree to pay any outstanding fees for any absent days that are not covered by subsidy.

Late Pick Up Penalties

I understand that all children must be signed out and leave CECC by 6:00 pm, according to the classroom clock. Penalties, including a fee of \$10.00 for any part of the first five minutes, an additional \$2 per minute afterwards, potential surcharge and/or withdrawal from the programme are in effect. Details are found in CECC's Late Pick up Policy in the Family Handbook.

Moving Out of District (for children attending our Eglinton site ONLY)

I understand that CECC's priority is to serve the families of children within our schools' catchment areas. Therefore, if I move to an address considered by the Toronto District School Board, to be out of the catchment area for Eglinton Public School, I will be expected to make alternate care arrangements as soon as possible, not later than June 30th of that school year. My child will not be eligible to re-register for another school year.

Name of child: _____

Healthcare

Medical Treatment – Emergency

If I cannot be reached in the event of an accident or other medical emergency, I give permission for the staff of CECC to obtain immediate qualified, medical assistance for my child. Treatment may include: Administration of drugs, anaesthetics, blood transfusions, injections, or any other treatment, as noted, to be recommended by the physician caring for my child.

It is understood that every effort will be made to contact me immediately and, that there will be no liability to the driver, staff, school or CECC.

Health Card Number * Optional If I have not shared my child's health card number and CECC has to take my child to a medical centre, where payment is required. I agree to reimburse CECC in full.

Excursions

While we make every effort to inform you of such outings, they may occur at the discretion of the childcare staff.

I understand that CECC cannot be held liable for any accidents or injuries that may occur as a result of these excursions.

I understand that if CECC takes my child on excursions out of the neighbourhood, I am required to sign a separated permission form.

Immunization

I agree to provide the immunization record from my/our child's physician (Toddler and Pre-School only)

I agree to provide my/our child's Statement of Conscience or Religious Belief (All ages), **if applicable**.

Anaphylaxis or other Medications

Anaphylaxis: If my child requires use of Epinephrine (EpiPen), I agree to provide a doctor's note, describing the reason for the medication, the treatment, dosage and when to administer. I will also complete CECC's treatment plan and bring the EPI Pen, labelled with a Pharmacist's prescription, before my child starts in the programme.

Other Medications: If my child requires other medications i.e. asthma medication; antihistamine, I agree to complete a CECC medication administration form and will ensure the medicine is prescribed by a medical doctor and it is in the original container with a legible Pharmacist's prescription, or doctor's note, indicating the date, doctor's name, dosage and instructions.

Administration: In the event that the medication needs to be administered while at CECC, I agree to administer the 1st dose at home.

Name of child: _____

Use of Hand Sanitizer (Alcohol Based Hand Rub)

I give permission for CECC’s staff to apply Hand Sanitizer (Alcohol Based Hand Rub – minimum of 70 percent alcohol) on my child:

_____ Yes

_____ No

Use of Sunscreen

I give permission for CECC’s staff to apply sunscreen (minimum 30 SPF) on my child (choose one):

_____ Apply sunscreen from home (no spray, please)

_____ Apply sunscreen provided by CECC (minimum of 30 spf)

_____ No sunscreen

Other instruction: _____

Use of Insect Repellent

I give permission for CECC’s staff to apply insect repellent (containing Deet) on my child during outings to wooded areas, conservation parks, etc:

_____ Yes

_____ No

SIGNATURE OF ACKNOWLEDGEMENT AND CONSENT

I have read and understood C.E.C.C.'s Family Handbook and the rules that apply within, including all the points that have been addressed above.

I certify that the information I have provided is valid and true. By signing below, I understand and accept the Policies of CECC and agree to abide by them.

_____	_____	_____
Parent Name	Parent Signature	Date of Completion

_____	_____	_____
Parent Name	Parent Signature	Date of Completion