

Mrs. Micha's Child Care, LLC.

"Admission Checklist"

mrsmichaschildcarellc.com
License # C02LE0096
W – (850) 668-3717 / ***F*** – (850) 668-3017



A "30-day" notice is all that is required to end or reduce services.

I/We, the Guardian(s) of _____, have completed the following steps necessary to enrolling our child in *Mrs. Micha's Child Care, LLC.*

1. _____ Application for admission in this packet has been completed and returned with the non-refundable ***admission fee of $100 for admission***.
2. _____ I/We have received and reviewed the *Mrs. Micha's Child Care, LLC* handbook or looked it up at *mrsmichaschildcarellc.com*
3. _____ The medical information form in this *packet* from *Mrs. Micha's Child Care, LLC* has been completed and signed by the guardian(s).
4. _____ A current ***"Blue and Gold" form (immunization form and medical exam)*** will be obtained from the pediatrician according to the state of Florida and the Leon County Health Department, with-in 30 days.
5. _____ ***Annual materials fee of $200*** for supplies will be paid with the August tuition and will be pro-rated and due up front for the first partial year. (Students who come 3 days or less a month do not pay.)
6. _____ Tuition has and will be paid on time. (Monthly payers owe by the 1st of each month. Unscheduled payers owe at the end of each week.)
7. _____ Tuition and Registration Agreement, Rate Sheet, Discipline, Expulsion, Suspension and Dismissal Policies in this packet have all been signed.
8. _____ If needed my child has Shadowed at *Mrs. Micha's Child Care, LLC.*
9. _____ I/We, the Guardian(s), have met and/or toured in Person or Virtually with the management of *Mrs. Micha's Child Care, LLC.*
10. _____ I/We, the Guardian(s), understand Smoking/Vaping, Use or Possession of Illegal Substances and/or Drinking Alcohol are Prohibited on the *MMCC* Child Care Grounds.
11. _____ *I/We, the Guardian(s), understand that All Fees are Non-Refundable and Discounts can Not be added with any other services or State Assistance and are Not Transferrable. Any Credits are adjusted accordingly and only redeemable with child care attendance and Not funds.*

_____ _____

Signature of Guardian Date



How did you hear about us?_____



Mrs. Micha's Child Care, LLC.

Application for Admission

_____ M / F

(Last) *(First)* *(Middle)* *(Circle – SEX)*

Childs full name

_____

Start Date *Age at Enrollment* ***Date of Birth***

_____	_____
Guardian 1	Guardian 2
_____	_____
(street)	(street)
_____	_____
(city, state, zip)	(city, state, zip)
Guardian 1 address	Guardian 2 address
_____	_____
Guardian 1 SSN	Guardian 2 SSN
_____	_____
Guardian 1 cell phone	Guardian 2 cell phone
_____	_____
Guardian 1 work phone	Guardian 2 work phone
_____	_____
Guardian 1 home phone	Guardian 2 home phone
_____	_____
Guardian 1 email	Guardian 2 email

*Child Lives With:*_____

_____

Extra **Emergency Contact** and **Relation** to *Child* Contact NUMBER

_____ _____

Signature of Guardian Date

Mrs. Micha's Child Care, LLC.

Pick Up Permission Form



The following persons are given permission to pick up my child from Mrs. Micha's Child Care, LLC.:

Name and Relation to the Child	Phone number
Name and Relation to the Child	Phone number
Name and Relation to the Child	Phone number
Name and Relation to the Child	Phone number
Name and Relation to the Child	Phone number
Name and Relation to the Child	Phone number

***Reminder:** Adults "18" years old and older and on this list are allowed to pick up a child from Mrs. Micha's Child Care, LLC and must show his/her photo identification card at pick up. Should a special situation arise the parent/guardian must give written authorization allowing someone who is not on this list to pick up his/her child. For example, an E-mail stating changes/additions.*

I/We, the parents of ***(Child)*** _____, allow the above listed individuals to pick up my/our child from the care of *Mrs. Micha's Child Care, LLC* and the care of the *Mrs. Micha's Child Care, LLC* staff on any given day that *Mrs. Micha's Child Care, LLC* is open for business without forewarning except for this authorization form allowed by the signature(s) below. I/We also understand that proper photo identification will be mandatory at the time of pick up and my/our child will remain in the care of *Mrs. Micha's Child Care, LLC* and the *Mrs. Micha's Child Care, LLC* staff until the proper photo identification is presented by the authorized individual.
**I/We are aware that DCF & MMCC Administration and Staff will have access to my/our child's records.*

Signature of Guardian	Date



Mrs. Micha's Child Care, LLC.

Medical Information



*Please let us know if your child has any health concerns or needs that will need to be met during the school day.
*This information is to help us ensure your child receives the best pre-school experience possible in an environment that is safe for him/her.
*I/We hereby grant permission for Administration and Staff of Mrs. Micha's Child Care, LLC. to contact the following medical personnel to obtain emergency medical care if warranted.

Child's name	Date of birth
Allergies	Medication taken
Special instruction	Dosage and time(s) given
Child's physician	Physician phone number
Preferred Family hospital	Hospital phone number

Classroom activities are carefully planned out and individual children are considered. Please list any Allergies and/or items that your child is not allowed to eat for reference when planning cooking activities:

Allergy/Unallowable food item	Allergy/Unallowable food item
Allergy/Unallowable food item	Allergy/Unallowable food item
Allergy/Unallowable food item	Allergy/Unallowable food item
Allergy/Unallowable food item	Allergy/Unallowable food item

I/We, the parents of _____, understand that the information given above is current and accurate. If any of the above information changes, it is my responsibility to notify the Operator at *Mrs. Micha's Child Care, LLC.*

Signature of Guardian	Date



Mrs. Micha's Child Care, LLC.

Rate Sheet



Please circle one: FULL-TIME PART-TIME DROP-IN

Hours	Full Time 7am-6pm, M-F	Part Time Pre-set Monthly Fee
Infant Program 0 months-11 months	$1,475 a mth	$14 an hr
Wobbler Program 12 months-23 months	$1,400 a mth	$14 an hr
Toddler Program 24 months-35 months	$1,375 a mth	$14 an hr
Prekindergarten Program 36 months and Up	$1,350 a mth	$14 an hr
VPK Wrap around fee (9mth school yr before Kindergarten)	$1,000 a mth	$14 an hr

Grade School / Summer Care	$1200 a mth	$14 an hr

If you pay by the hour, please fill out this chart:

Child's Name_____

PART-TIME SCHEDULE:

Monday	Tuesday	Wednesday	Thursday	Friday
In:	**In:**	**In:**	**In:**	**In:**
Out:	**Out:**	**Out:**	**Out:**	**Out:**

For scheduling purposes In and Out times must start and end at the TOP of the HOUR.

Sibling Discounts: 10% Off 2nd child, 5% Off 3rd or 4th child.

Military Discount – with an active ID card – 10% off.

(Discounts can Not be combined with any special offers, Discounts or State Assistance.)

_____ _____

Signature of Guardian Date



Mrs. Micha's Child Care, LLC.

Tuition, Registration and *30-Day Notice*



1. I/we understand that an application for admission must be completed and returned with the ***non-refundable admission fee of $100.00*** as soon as we wish to hold their spot.

2. I/we understand that this agreement is reserving a space for my/our child and it is signed upon acceptance into the program and that all fees chosen in this packet will be collected as they are due.

3. I/we understand that an ***annual materials fee of $200***, will be charged each year that my/our child is enrolled and will be used for materials and expendable supplies. This does not include food or diapers but does include wipes, art supplies and a sleeping mat. For budgetary reasons this fee is ***not refundable***. **Parents/Guardians are Responsible for Supplying Diapers and Food Items Daily.*

4. I/we understand that the immunization from and medical examination form must be filled out by my/our child's physician, signed by a Parent and submitted to *Mrs. Micha's Child Care, LLC* by the listed start date or 1st date of Attendance. *I/we Understand that there may be times that a child may attend that has Not been Fully Vaccinated. Ex: Religious/Medical Exemption Form.*

5. I/we understand the medical sheet must be completed and signed by the Guardian.

6. I/we understand that tuition is *not refundable* and is due in a timely manner whether we are monthly payers or unscheduled payers. ***Monthly payers'*** *tuition is due in advance by the 25th of the previous month.* For example, August tuition is due by July 25th. Tuition is late if it is received after monthly services have begun on the 1st. In this event a payment extension fee of ***$50*** will be charged. Tuition is billed at a flat, monthly rate regardless of number of days the center is open in a particular month, student illness, or vacation. Billing is based on 20 days. 22 is the average number of open full-time days. Adjustments are not made for this as we, at MMCC, need a consistent fee structure to offer quality staff and a first-rate environment. ***Unscheduled payers*** pay after each week before the following week ends. 7 days later if payment has not been made a payment extension fee of ***$45*** will be applied for late weeks. If clients need to come for more hours than scheduled, a bill for the unscheduled hours will be generated for payment. ***Late Pickup Fee*** the Center Opens at 7:00 am and Closes at 6:00 pm. I/We understand that there will be a ***$40 Late Fee*** Assessed, Per Child – Per Day, if there is a pick up After 6:00 pm. ***Returned Check Fee - $50.***

7. I/we understand that each family is expected to sign a tuition agreement with *Mrs. Micha's Child Care, LLC. I/we understand that Tuition and fees are non-refundable and* Care is provided for a specific number of children. In order to maintain a child's program space, an agreement must be signed and also, paid for each month, regardless of vacations and illnesses. Families are expected to financially fulfill their space agreement for the duration of the child's enrollment with *Mrs. Micha's Child Care, LLC.*

8. **I/we understand that if I/we should decide to withdraw or reduce my/our child's hours at *Mrs. Micha's Child Care, LLC* a "30-day" written or email notice is required to end services or a schedule change form with hour reduction must be submitted "30-days" prior to the schedule change going into effect.**
   ***Guardians are responsible for full tuition for "30-days" after a withdraw notice is given.**
   Mrs. Micha's Child Care, LLC* does not require annual contracts, However, instead we use this standard business practice to maintain a healthy budget. *All fees are Non-Refundable.

9. I/we understand that *Mrs. Micha's Child Care, LLC.* has and reserves the right to send past due account information to collections if/when needed.

_____ _____

Signature of Guardian Date

Mrs. Micha's Child Care, LLC.

Discipline Policy



The environment of *Mrs. Micha's Child Care, LLC* is structured to enable children to make good choices concerning activities & materials. This ability to choose and plan gives the child power & independence and helps to prevent many conflicts during the school day.

The children are encouraged to develop language skills that help them to communicate their needs and wants. Language skills are continuously targeted and developed as children are encouraged to use language as a problem-solving tool throughout the day.

If a child is experiencing difficulty using language to solve problems in one area of play, he/she is offered another play activity. In the event that the child is still unable to make appropriate choices, refrain from biting or using language to have his/her needs met, he/she will be removed from the problem area and given a personal space away from the others. He/she may return to the group or activity when he/she is ready to make a positive choice and use language appropriately to process and deal with conflicts.

Guidelines for behavior are clearly explained to the children. Appropriate conflict resolution methods are modeled and continuously encouraged by teachers in order to allow the children opportunities for decision making and self-direction. *Mrs. Micha's Child Care, LLC* strives to provide an environment that allows children and adults alike to function to their fullest potential in solitary and group activities. The goal of the program is to develop oral communication skills which help to build on an internal control system, enabling individuals to grow and function successfully in society. Should a child continue aggressive behavior or excessive Biting after parent conferences, we may encourage the family to look for a setting that would further help the child with his/her needs.

***Children will not be denied active play as a consequence to misbehavior.**
***Children will not be subjected to discipline, which is severe, humiliating or frightening.**
***Discipline shall not be associated with food, rest or toileting.**
***Spanking or any other form of physical punishment is prohibited.**
***Corporal punishment is never appropriate and never used.**

**Safety for All of the children in our care is priority, so if there is continuous aggressive behavior with a child they will be suspended and if the behavior is not managed timely, Services may be Terminate for the safety of the children in our care.*

_____ _____

Signature of Guardian Date

Mrs. Micha's Child Care, LLC.

Restrictions, Expulsion, Suspension & Dismissal Policies

*Our program is committed to providing a safe, nurturing environment to enrich the learning and growth of the children in our care. We strive to ensure all of our students are set up for success regardless of their need, development or cultural background. In order to provide a safe and professional environment for all, here is our policy page regarding restrictions, expulsion, suspension and dismissal.

*Every effort will be made to prevent the expulsion or dismissal of children/person(s) from the program. However, Mrs. Micha's Child Care, LLC. Reserves the right to restrict/cancel/terminate the enrollment of a child, parent, guardian or Authorized Pick-up person for any of the following reasons, not limited to, but including:

- Non-payment or excessive late payment of fees/tuition.
- Failure to adhere to policies and procedures as outlined in the program's family handbook
- The child has needs which we cannot adequately meet with our current staffing patterns
- The child's behavior threatens the health and safety of him/herself, the other children and/or other adults or program staff. (This includes exiting the facility without a parent or staff member.)
- The parent/guardian exhibits behavior which is detrimental to the health, safety and well-being of the children, other adults and/or staff/administration of MMCC or negatively interferes with the normal functioning of the classroom and/or program. This includes but is not limited to: vulgarity, intimidation, harassment, bulling, physical harm, possession of a weapon or illegal device/substance/alcohol or violation of any child care licensing regulations.

Restrictions - Some Restrictions may be set into place if/when needed such as:

- Alternat Drop off/Pick-up procedures may be modified with an individual if/when needed due to a specified situation and/or Denied access to the MMCC Child care premises in order to have a child remain in our care.
- Situational Severity will be taken into consideration on a case-by-case basis.

Expulsion – Terminating the enrollment of a child or family of Mrs. Micha's Child Care, LLC. due to documented Or excessive challenging behavior(s), Biting/Hitting/Violent Acts, Flight Risk, possession of a weapon or Illegal substance/device or Alcohol on MMCC Premises or health condition(s), etc..

- Excessive Biting or Aggressive Behavior towards Self and/or Others.
- Flight Risk – Exiting the Facility without a Parent or Staff member.

Suspension – Reduction in the amount of time a child may attend Mrs. Micha's Child Care, LLC. (ex: asking a Parent/Guardian of the child to pick up immediately or asking for the child to not return for a specific time period.)

Dismissal – Removal or Restrictions set into place for the Person(s) in question and/or a child from MMCC due to factors *other* than the child's behavior. Some parental or adult actions may cause a child's dismissal. Reasons for dismissal (not related to the child's behavior or actions)

Include:

- Documented habitual disregard for drop off and pick up times.
- Documented habitual disregard for sick child policies.
- Documented abuse/bulling/threatening behavior toward staff, children or other persons or possession of a Weapon on MMCC Child Care Grounds.
- Documented or Suspected Use or Possession of any Smoking/Vaping device, Use or Possession of Alcohol and/or an Illegal Substances and/or Any Active Intoxication of a Substance or Alcohol while on *MMCC* Child Care Grounds.
- Documented pattern of chronic absences without documentation of illness or any special circumstances.
- Failure to comply with medical and immunization requirements.
- Documented habitual nonpayment of fees.

Available Provider Resources:

** Warm – line / Inclusion Specialists * LCS – Leon County Schools * Early Steps * Child Find*
** Specialized Care Team * ELC-Early Learning Coalition of the Big Bend * Mental Health Consultants*
** DCF–Department of Children & Families * TATS (DOE Technical Assistance & Training System Ages 3-5)*
** Current Service Provider (therapists, counselors, infant/toddler specialists already working with the family)*

_____ _____

Signature of Guardian **Date**

Mrs. Micha's Child Care, LLC.

MMCC - Photo Release Form

I_____

(Parent Name)

give *Mrs. Micha's Child Care, LLC* permission to use photos/videos that

_____

(Student Name)

might be in when pictures/videos are being taken on center property for parents, students, activities, class projects, parent gifts, portfolios, promotions, child activities and classroom share sites. *Video footage is Only Reviewed by Administration and/or the proper Authorities if/when needed.

_____

(Parent Signature) (Date)

Mrs. Micha's Child Care, LLC.



mrsmichaschildcarellc.com

Work: (850) 668-3717
Fax: (850) 668-3017
1268 F Timberlane Rd.
Tallahassee, FL. 32312
NEAR THOMASVILLE RD & I-10

"Learning through Planning and Play!"

Hourly Child Care Rates & a Great VPK Score

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The final following pages of this Admissions Packet are brochures the State requires all guardians of enrolled Students read and sign for their file at Mrs. Micha's Child Care, LLC.

(On-line copies may be hard to read. Hard copies are available.)

KNOW YOUR CHILD CARE FACILITY



What is quality child care?

Quality child care offers healthy social and educational experiences under qualified supervision in a safe, nurturing, and interactive environment.

Indicators of a Quality Child Care Setting:

Qualified Staff:
Meets required training and certification standards.

Positive Guidance:
Uses redirection and encouragement to support positive behavior.

Open Communication:
Provides regular updates and maintaining open feedback channels with parents.

Parental Involvement:
Encourages parents to participate in facility activities.

Structured Routine:
Follows a consistent daily schedule with balanced activities.

Safe Environment:
Maintains a clean, well-kept, and child-friendly space.

Age-Appropriate Activities:
Offers activities that support learning and development.

Staff-to-Child Ratio:
Meets or exceeds minimum staff-to-child ratio requirements.

General Requirements:

Every licensed child care facility must meet the minimum state child care licensing standards pursuant to s. 402.305, F.S., and ch. 65C-22, F.A.C., which include, but are not limited to, the following:

- ☐ Posts valid license for parents to see.
- ☐ Has Level 2 background screenings for all personnel.
- ☐ Maintains appropriate transportation vehicles (if transportation is provided).
- ☐ Provides written behavior guidance practices to parents.
- ☐ Provides appropriate access to the facility during normal hours of operation.
- ☐ Maintains minimum staff-to-child ratios:

AGE OF CHILD	STAFF: CHILD RATIO
Infant	1:4
1 year old	1:6
2 year old	1:11
3 year old	1:15
4 year old	1:20
5 year old and up	1:25

Signature of Guardian _____ **Date** _____

Physical and Quality Environment

- **Cleanliness:** Keeps the space clean and free of hazards.
- **Inviting Space:** Creates a welcoming, child-friendly environment that showcases children's work.
- **Safety:** Ensures a safe and secure setting that supports children's independence.
- **Encouraging Play:** Provides age-appropriate toys and materials that are easily accessible.
- **Positive Atmosphere:** Fosters a warm, understanding, and responsive environment.
- **Stimulation:** Supplies materials and experiences that spark curiosity and development.

Characteristics of a Quality Caregiver

- **Adaptability:** Adjusts to different situations and children's individual needs.
- **Good Moral Character:** Passes background checks, including history and screening for abuse or neglect.
- **Qualifications:** Holds appropriate training and certifications in early childhood education.
- **Creativity:** Engages children in interactive and educational activities.
- **Patience and Empathy:** Responds to children's needs with patience, compassion, and stability.
- **First Aid and CPR Training:** Is prepared to handle emergencies with basic first aid and CPR knowledge.
- **Communication Skills:** Communicates openly and effectively with children and parents.

This child care facility is licensed according to the minimum licensure standards included in section 402.305, Florida Statutes (F.S.), and Chapter 65C-22, Florida Administrative Code (F.A.C.)

License Number: C02LE0096 License Issued on: 4/5/26 License Expires on: 4/5/27

For more information regarding the compliance history of this child care provider, visit: www.MyFLFamilies.com/childcare or call (850) 488-4900

Reports of suspected cases of physical abuse, sexual abuse, and neglect are received and referred for investigation by the Abuse Hotline. To report suspected cases of child abuse or neglect, please call the Florida Abuse Hotline at 1-800-96-ABUSE.

This flyer was created by the Florida Department of Children and Families, Office of Licensing pursuant to s. 402.3125(5), F.S.

CF/PI 175-24

Signature of Guardian **Date**

During the 2009 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes provide parents with information detailing the causes, symptoms, and transmission of the influenza virus (the flu) every year during August and September.

My signature below verifies receipt of the brochure on *Influenza Virus, The Flu, A Guide to Parents:*

Name:_____

Child's Name:_____

Date Received:_____

Signature:_____

Please complete and return this portion of the brochure to your child care provider, in order for them to maintain it in their records.

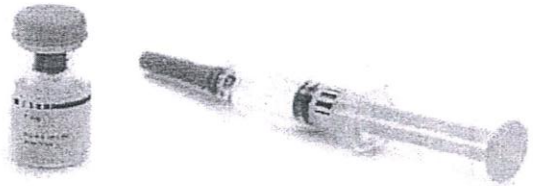


What should I do if my child gets sick?

Consult your doctor and make sure your child gets plenty of rest and drinks a lot of fluids. Never give aspirin or medicine that has aspirin in it to children or teenagers who may have the flu.

CALL OR TAKE YOUR CHILD TO A DOCTOR RIGHT AWAY IF YOUR CHILD:

- Has a high fever or fever that lasts a long time
- Has trouble breathing or breathes fast
- Has skin that looks blue
- Is not drinking enough
- Seems confused, will not wake up, does not want to be held, or has seizures (uncontrolled shaking)
- Gets better but then worse again
- Has other conditions (like heart or lung disease, diabetes) that get worse



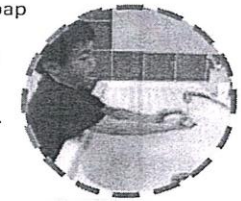
How can I protect my child from the flu?

A flu vaccine is the best way to protect against the flu. Because the flu virus changes year to year, annual vaccination against the flu is recommended. The CDC recommends that all children from the ages of 6 months up to their 19th birthday receive a flu vaccine every fall or winter (children receiving a vaccine for the first time require two doses). You also can protect your child by receiving a flu vaccine yourself.

What can I do to prevent the spread of germs?

The main way that the flu spreads is in respiratory droplets from coughing and sneezing. This can happen when droplets from a cough or sneeze of an infected person are propelled through the air and infect someone nearby. Though much less frequent, the flu may also spread through indirect contact with contaminated hands and articles soiled with nose and throat secretions. To prevent the spread of germs:

- Wash hands often with soap and water.
- Cover mouth/nose during coughs and sneezes. If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.
- Limit contact with people who show signs of illness.
- Keep hands away from the face. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.



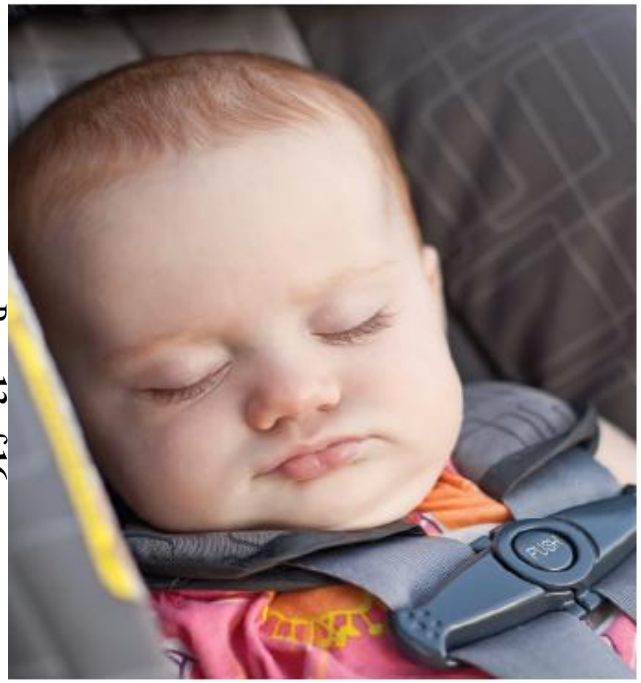


When should my child stay home from child care?

A person may be contagious and able to spread the virus from 1 day before showing symptoms to up to 5 days after getting sick. The time frame could be longer in children and in people who don't fight disease well (people with weakened immune systems). When sick, your child should stay at home to rest and to avoid giving the flu to other children and should not return to child care or other group setting until his or her temperature has been normal and has been sign and symptom free for a period of 24 hours.

For additional helpful information about the dangers of the flu and how to protect your child, visit: http://www.cdc.gov/flu/ **or** http://www.immunizeflorida.org/

A change in daily routine, lack of sleep, stress, fatigue, cell phone use, and simple distractions are some things parents experience and can be contributing factors as to why children have been left unknowingly in vehicles...



FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES

MYFLFAMILIES.COM

Developed by:

The Office of Child Care Regulation

www.myflfamilies.com/childcare
CF/PI 175-12, May 2019

When life happens...Don't be a

DISTRACTED ADULT





FACTS ABOUT HEATSTROKE:

It only takes a car **10 minutes to heat up 20** degrees and become deadly.

Even with a **window cracked,** the temperature inside a vehicle can cause heatstroke.

The body temperature of a child increases **3 to 5 times faster** than an adult's body.



PREVENTION TIPS:

- Never leave your child alone in a car and call 911 if you see any child locked in a car!
- Make a habit of checking the front and back seat of the car before you walk away.
- Be especially mindful during hectic or busy times, schedule or route changes, and periods of emotional stress or chaos.
- Create reminders by putting something in the back seat that you will need at work, school or home such as a briefcase, purse, cell phone or your left shoe.
- Keep a stuffed animal in the baby's car seat and place it on the front seat as a reminder when the baby is in the back seat.
- Set a calendar reminder on your electronic device to make sure you dropped your child off at child care.
- Make it a routine to always notify your child's child care provider in advance if your child is going to be late or absent; ask them to contact you if your child hasn't arrived as scheduled.

During the 2018 legislative session, a new law was passed that requires child care facilities, family day care homes and large family child care homes to provide parents, during the months of April and September each year, with information regarding the potential for distracted adults to fail to drop off a child at the facility/home and instead leave them in the adult's vehicle upon arrival at the adult's destination.

My signature below verifies receipt of the Distracted Adult brochure

Parent/Guardian:

_____

Child's Name:

_____

Date:

_____

Please complete and return this portion of the brochure to your child care provider, to maintain the receipt in their records.

Permission for *Food-related Activities & Special Occasion* food consumption

Pursuant to 65C-22.005(1)(c)2., F.A.C., licensed child care facilities must obtain written permission from parents/guardians regarding a child's participation in food related activities. These activities include such things as: classroom cooking projects, gardening, school wide celebrations, and birthdays.

I _____ give/decline permission for my child _____
(Parent or Guardian) *(circle one)* *(Child's Name)*

to participate in food related activities and special occasions wherein food is consumed.

Please provide the following information:

____My child DOES NOT have a food allergy or dietary restriction. He or she may participate in activities.

____My child DOES NOT have a food allergy or dietary restriction. He or she may not participate in activities.

____My child DOES have a food allergy or dietary restriction. He or she may participate in activities, but may not eat or handle the following items (please list below):

_____
_____
_____
_____

____My child DOES have a food allergy or dietary restriction. He or she may not participate in activities

I understand that it is my responsibility to update this form in the event that my decision for permission changes. I agree that this form will remain in effect during the term of my child's enrollment.

_____ _____
(Parent or Guardian) (Date)

Mrs. Micha's Child Care, LLC.



MMCC accepts: Cash, Check, Money Orders, ProCare Debit, Credit Cards (for Enrolled Families) & PayPal Payment Options!

MMCC PayPal QR Code:

There is a 2.9% + $0.30 Fee Assessed with All Credit Card, ProCare & PayPal Transactions Completed.

~If you choose these Payment Options, it is your responsibility to cover the cost of these fees, so please factor these Fees into your final Payment Amount.
(*These Fees are Not always calculated in advance by the agency.*)

~Please List your *Child's First and Last Name in the Notes section* of your Payment so Your account will be Identified and Credited Correctly.

By Signing this Form, I agree with the ProCare Credit Card & PayPal Processing Fees, Terms and Conditions when choosing these payment options. *

_____

Signature of Guardian/Date