



Welcome to Rainy Dayz Preschool and Kindergarten!

At Rainy Dayz, we are committed to providing an environment that will nurture and challenge your child, insight curiosity and build a true love of learning. All class curriculums have been created using Washington State's Essential Academic Learning Requirements (EALR's) to stimulate emotional, social, cognitive and physical development.

To achieve optimum success, we use both Montessori and traditional teaching philosophies. Montessori allows us to give your child options for their personal learning needs. They are given time each day to explore their environment and that allows us to recognize and appreciate the individual child. Traditional methods give your child the appropriate social and emotional skills they need to transition into an elementary school environment.

We are truly honored that you have chosen Rainy Dayz for your child's early childhood education experience! We promise to care for them, support them and help them grow into the unique individual they are!

I look forward to a successful and exciting year with your family!

Sincerely,

Kiersten Shaffer
Owner

The following forms are required to have on file at school. Please complete them all as thoroughly as possible and return to us by the 1st day of school. While we understand that some of these questions are a bit personal in nature, our goal in obtaining this information is to ensure the best possible learning experience for your family. ****All information provided will be kept strictly confidential and used only for creating an optimum learning environment for your child.*** Please complete a set of form for each child enrolled.

Child's Name: _____

Date of Birth: _____

1. Did you experience a normal pregnancy and delivery with your child? If not, please explain.

2. Has your child been meeting developmental milestones such as speech, vocabulary, gross motor, fine motor etc on time? If not, please explain.

3. Has your child received or is currently receiving services for any developmental needs? If yes, please explain.

4. Are you concerned about any areas of your child's development (cognitive, social, emotional, gross or fine motor)?

5. Does your child have any allergies or other medical concerns that we should know about?

6. Has your child been in a pre-school or daycare environment before? If yes, where?

7. Are you concerned about your child's ability to adapt to the Rainy Dayz facility, our staff or other students? If yes, please explain.

8. Does your child have regular play dates with children around their age? If not, why?

9. Does your child live with both parents? If not, how is custodial time spent?

10. What is the primary language spoken in the home?

11. How do you reward positive behavior?

12. How do you discipline your child?

13. What makes your child happy? Sad?

14. If your child is having a difficult day, what do you do at home to soothe them?

15. Is there anything else you would like us to know about your child/family/?

CONSENT FOR PICK-UP

Please list all people who have your permission to pick up your child from Rainy Dayz Preschool. No one will be allowed to pick up your child that is not on this list. All persons with permission to pick up your child will need to show a picture id prior to us releasing the child. There are no exceptions to this. Please inform everyone on this list that they need to have id with them at time of pick up. Names can be added and removed from this list as needed.

Child's Name: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Directory release form for Rainy Dayz Preschool

School Year: _____

Child's name: _____

A directory of contact information will be created for each classroom. This directory is to be used for play date setups, invitations to parties etc. **It is not to be used for solicitation of any business or services.**

I hereby give consent to Rainy Dayz Preschool to use my contact information for the classroom directory.

Signature of parent/guardian

Date

I **DO NOT** give consent to Rainy Dayz Preschool to use my contact information for the classroom directory.

Signature of parent/guardian

Date

Print name

Media/Picture release form for Rainy Dayz Preschool

School Year: _____

Child's name: _____

Any photos or videos taken of your child while at Rainy Dayz Preschool may be used for the purposes of promotional materials such as but not limited to; web site publication, brochures and/or in center decorations. (No pictures will be ever be sold.)

I hereby give consent to Rainy Dayz Preschool to use photos and/or videos of my child for promotional purposes.

Signature of parent/guardian

Date

Print name

I **DO NOT** give consent to Rainy Dayz Preschool to use photos and/or videos of my child for promotional purposes.

Signature of parent/guardian

Date

Print name

Medical Release

Child's Name: _____ Date of Birth: _____

Parent/Guardian: _____ Parent/Guardian: _____

Best Contact #: _____ Best Contact #: _____

Family Physician: _____ Phone: _____

Preferred hospital: _____

Medical conditions, medication information and/or allergies we should be aware of *:

* Any medication prescribed or over the counter, required to be given to your child during school hours must be handed directly to your child's teacher or the director with a completed consent to give medicine at school form.

In the event of an emergency, please notify the following person(s) in case I cannot be contacted:

1st- Name: _____ Phone: _____ Relationship: _____

2nd- Name: _____ Phone: _____ Relationship: _____

I authorize qualified emergency medical professionals to examine and in the event of injury or serious illness, administer emergency care to the above named child. I understand every effort will be made to contact me to explain the nature of the problem prior to any involved treatment.

In the event it becomes necessary for Rainy Dayz Playcenter, LLC to obtain emergency care for my child, neither the staff or Rainy Dayz assumes financial liability for expenses incurred because of the accident, injury, illness and/or unforeseen circumstances.

Parent/legal guardian of child

Date