

244241 Range Road 33 Calgary Alberta T3Z 2E8

Record of Signs and Symptoms of Allergies: revised Nov. 2014

| Child's Name: | Program: Daycare or before and after school |
|-------------------------------|--|
| Allergies: | |
| Description of Signs and Symp | toms: (Describe what happens to your child when experiencing this allergy) |
| | |
| | you give your child if they are having a reaction) |
| The order in which the medica | ation is to be administered: |
| | |
| 3) | |
| 911 should be called: | |
| | |
| | |
| Date: | |

Springbank Cottage Childcare Ltd.

Parent Consent and Doctor's Certificate Allergy Policy

Springbank Cottage Childcare Allergy Parent Consent Form

I have read the Allergy Policy of Springbank Cottage Childcare Ltd. I accept that the Cottage and it's staff cannot be responsible for any allergic reaction suffered by children in it's care- whether at the facility or outside the facility- caused by contact with any allergen. I agree to accept the allergy- related risks associated with enrolment of my child in this program.

| Parent Name | |
|--|---|
| Child's Name | |
| Parent signature | |
| Date | |
| | |
| | has known allergies to the followin |
| If he/she should come into contac recommended : | t with these substances, the following treatment is |
| | Parent Signature |
| Doctor Name | Doctor Signature |
| Date | |



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Freedom of Information Policy – Children's Files

| I recognize and respect that all informatio confidential and will not be shared with ar | on seen and pertaining to your child in their personal file is ny other person. | |
|---|---|----|
| Written permission must be give SCC staff. | en for files to be reviewed by anyone other than parents a | nd |
| In an emergency situation your (EMS, Hospital Personnel) | child's information will be shared with Medical personnel | |
| Child's Name | Program: Daycare Or Before and After School | |
| Parent Signature | Date | |
| | | |
| | | |

Date

SCC Staff Signature

Volunteer Policy

The OSC program allows all parents or guardians the opportunity to volunteer in the program this can include helping staff out within the room to work on craft activities, to help out with specialty days such as Circus Day. They are also welcome to join us on fieldtrips out of the building for example science centre or swimming.

All volunteers must be a close relative to the child or the main guardian. All volunteers must provide a current picture ID as well as a current Police Check. These will be kept on file for future opportunities but will also be accessible to all staff to ensure all documentation is up to date.

Volunteers are expected to check in with the Director before they begin working in any of the rooms.

Springbank Cottage Childcare Ltd.

244241 Range Road 33, Calgary Alberta, T3Z 2E8

403-242-1244

Volunteer Pledge of Confidentiality

In the course of my volunteer duties at the Cottage, I acknowledge that I may have access to information that is personal and/or confidential in nature. I understand that this information is not to be communicated to anyone or disclosed in any manner of form other than for the sole purpose of fulfilling my duties with the cottage context of under the Freedom of Information and Protection of Privacy (FOIP) Act.

| I understand that Springbank Cottage Childcar required by statute, and I pledge to maintain c | , , | dentiality, which is nov |
|---|----------|--------------------------|
| Volunteer Name | Date | |
| Volunteer Signature | | |
| Please record your child's name and room | | |
| Child's Name: | | |
| Room: | | |

Springbank Cottage Childcare LTD.

PARENT CONSENT FORM FOR BUG SPRAY/SUNSCREEN APPLICATION (updated Nov 2014)

Springbank Cottage Childcare Ltd. is providing the following sunscreen for the use of the children when they are taken outside. The staff will apply the sunscreen 15 to 30 minutes before going outside to play from the month of April to October.

The brand that we are currently using is Equate sunscreen Lotion SPF 60. If you the parent do not want us to use these brands of sunscreen on your child please provide a labelled bottle of the brand you would like us to use. (This bottle will stay at the cottage so your child is always protected from the sun.

We also have Great Value Insect Repellent for kids for the staff to use when necessary. If not, please send something for the bugs for your child to use.

(Cut here and return lower portion)

Child's Name: ______ yes please use the sunscreen provided

No I will provide a bottle of sunscreen for my child

Yes the insect repellent is fine

No please do not use the insect repellent on my child. I will provide an alternative.

Parent/Guardian Signature _____

Date_____

Springbank Cottage Childcare Ltd.

Date

Photo and Social Media Policy

From time to time we like to take and display photos of the children at play for the enjoyment of the families. Under no circumstance will children's photos be shared on any Social Media Sites such as Facebook, Twitter, Instagram, texting or Blogging or any other Social Media Sites. Due to privacy laws, we must have permission to take and use photos of your child within our center. Although parents and staff are encouraged to take photos during any Springbank Cottage Childcare Ltd. activity it is against FIOP Policy to share photos that may show children other than your own on any public site. _____, grant permission to Springbank I, parent/guardian of _____ Cottage Childcare Ltd. to take and display photos of the above mentioned child for the purpose of displays and bulletin Boards with in the center. _____, do not grant permission to I, parent/guardian of _____ Springbank Cottage Childcare Ltd. to take and display photos of the above mentioned child for the purpose of display and bulletin boards with in the center. I will under no circumstances share photos of any other child other than my own on any public site including but not limited to Email, Facebook, Twitter, Instagram, texting or Blogging. Parent's/guardian's Signature