



Welcome New and Returning Little Hands Parents,

We look forward to an exciting year ahead, filled with play and learning for you and your child!

In order for you and your child to be eligible to attend a SUMMER class, your completed forms must be received at or before our mandatory Summer Orientation, which will be held on Saturday, May 21 from 9:30-11am.

In order for you and your child to be eligible to attend a FALL class, your completed forms must be received at or before our mandatory Fall Orientation, which will be held on Tuesday September 6, 2016 at 6:30PM.

Forms can be brought to Orientation or mailed to:

**Little Hands
P.O. Box 675
Belmont, CA 94002
(Attn: Office Manager)**

Forms Checklist:

- Parent Medical Form (TB Test): Submit one form for EACH attending adult. Due to the young age of the children in the Little Hands program, tests must be completed within one year of the start of class
- Child Medical Form: You may attach a separate immunization record, but your child's physician must also sign our form indicating your child is able to fully participate in our program.

Please keep a copy of your medical forms for your records. The Parent Responsibilities Form, signed online during the registration process, is also attached for your records. Please review the responsibilities before attending Orientation.

We look forward to meeting you at your relevant Orientation. These sessions are a vital part of entering our program and are wonderful opportunities for you to learn more about Little Hands, ask questions, meet other parents, become acquainted with the details of your specific class, and tour the school.

We hope you will make every effort to attend. If you have any immediate questions, or you cannot attend on this date, please contact our Office Manager at admin@littleshands.org to arrange a make-up date.



_____ Class Day and Time

_____ Parent Last Name

PARENT MEDICAL FORM

The State Health Department requires that every adult attending school with a child must have a negative TB test. Little Hands must have verification of your test prior to you and your child attending school. **Due to the young age of the children in our program, tests must be completed less than one year from the start of class. You will not be allowed to participate until your TB test results have been received.**

This form is for verification of the Participating Parent TB Test. Your doctor's signature is required at the bottom of this form unless you attach a TB clearance card, which can be approved by your doctor or the Health Department.

If you are pregnant or nursing, you may be excused from taking the TB test until you are medically able. Please provide a signed and dated doctor's note stating your reason for being excused.

Your own physician may give you an intradermal (skin) test or a chest x-ray (if your PPD test is positive). Please complete this form or provide a comparable form. Another option is to go to one of the following drop-in locations. Please call to verify hours and cost.

US Healthworks
125 Shoreway Rd.
San Carlos, CA 94070
(650) 589-9420
M- F: 8am-5pm
Fee: \$40.00

Immediate Care
60 N. El Camino Real
San Mateo
(650) 570-2273
M,Tu,W,F: 8am-7pm, Th 8-12
S: 9am-4pm
Fee: \$50

MinuteClinic at CVS
987 East Hillsdale BLVD
San Mateo
(866) 389-2727
M-F: 10-6:30 (closed 2-3)
Sat and Sun: 9-5:30 (closed 1-2)
Fee: \$64

_____ Full Name of the Participating Parent

_____ Home Address (Street, City, Zip)

PPD Tuberculin Test

Date: _____

Result: Negative Positive

Chest X-Ray (Required if PPD Test is positive)

Date: _____

Result: Negative Positive

Name of Clinic/Office

Physician's/ Nurse's Signature



_____ Class Day and Time

_____ Parent Last Name

CHILD MEDICAL FORM

The California School Immunization Law requires that **children must be up-to-date on their immunizations (shots) to attend** school or childcare.

Your child will not be able to attend class unless the immunization record is presented and up-to-date* (You may attach a separate immunization record, but your child’s physician must also sign this form.)

*If your child is not immunized or on a different immunization schedule for medical reasons, please have your doctor indicate so on the form below or on the attached immunization record.

Note: Any child under the age of 18 months or with a temporary medical reason for not being fully vaccinated is considered conditionally admitted to Little Hands, under California State Law. Little Hands will follow-up to receive information from parents when new vaccinations are due. It is, however, the parent’s responsibility to continue to make sure their child remains current on their vaccinations and informs the Little Hands Registrar when your child receives new vaccinations. If your child does not stay current on vaccinations and does not have a valid medical exemption, you will no longer be able to attend Little Hands under California State Law. For more information about vaccine schedules and California’s immunization laws, please go to shotsforschool.org.

_____ Child’s Full Name

_____ Child’s Birthdate

Date each dose was administered.

Vaccine	1st	2nd	3rd	4th	5th
Polio (OPV or IPV)					
DTP/DTaP/DT/Td					
MMR					
HIB Meningitis					
Varicella (Chickenpox)					
Hepatitis B					

The above child IS / IS NOT physically and emotionally able to participate in a ONCE / TWICE per week preschool program.

Comments (physical or emotional conditions requiring special attention, medication, etc.):

Physician/Nurse Signature: _____ Date: _____



PARENT RESPONSIBILITIES for the 2016-2017 SCHOOL YEAR

Little Hands is a parent-child cooperative where everyone has an opportunity to learn and grow together. Your active participation ensures the smooth operation of the school, the overall success of the program, and a positive experience for your family. Parents learn first-hand that while being part of a co-op is work, it is also fun AND the rewards are many! Hopefully this is just the beginning of your active participation in your child's education.

Please review the following responsibilities of the Little Hands program:

§ **Parent-Child Class Attendance:**

- Regular attendance at day classes
- Active participation in observations, supervisions, and discussions
- After-class cleanup

§ **Parent-Only Night Class Attendance:**

- Orientation
 - 2 Class Meetings (1 Fall and 1 Spring)
- Make-ups are expected for each missed night class*

§ **Job and Event Hours:**

- 15 job hours plus 5 hours through your school job
 - 5 hour commitment towards one of the community social or fundraising event
- Families that begin in January or later will have a prorated requirement of 10 hours total.*

§ **Maintenance:**

- One 3.5-hour maintenance day
- These days are scheduled throughout the year, allowing families to select a day that works for them.*

§ **Fundraising:**

- Participate in eScrip Fundraising Program (Little Hands ID #: 125298634)
 - Participate in AmazonSmile
 - Participate actively in school fundraisers
- Your participation helps keep tuition reasonable, funds new equipment purchases and site improvements, and supports a high-quality staff.*

§ **Health forms:**

All forms MUST be turned in PRIOR to attending class

- TB test for each participating adult
- Child Medical Form with Physician signature and an up-to-date immunization record for the child

IMPORTANT: KEEP COPIES FOR YOUR FILE

CO-OP DEPOSIT REQUIREMENT

Little Hands is a volunteer-driven organization and your active participation ensures the smooth operation of the school, the overall success of the program, and a positive experience for your family. A \$300 Co-op Deposit is required at the beginning of the school year and is reimbursed once the family has completed the following by June 15, 2016:

1. Fulfilled at least 20 job hours* (15 towards assigned job and 5 towards an event)
2. Completed one 3.5-hour maintenance day
3. Completed and submitted a Job Completion Form to the Assigned Board Member

Should this not be completed by June 15th, the Co-op Deposit will be forfeited. If a class is dropped, the Co-op Deposit will be refunded per the Class Refund Policy outlined on this page.

* Families that begin in January or later will have a prorated requirement of 10 hours total (8 towards your assigned job and 2 towards an event). A maintenance day must still be completed.

REFUND POLICY for 2016-17 SCHOOL YEAR

The following is the Little Hands tuition reimbursement policy. Please read it carefully:

Registration Fee

There is a \$25 non-refundable registration fee for Summer Camp and a \$100 non-refundable registration fee for the 2016-2017 school year.

Drop Request

Families who decide to withdraw **MUST** submit a Drop Request by emailing your teacher, as well as the registrar with notice of your plans.

Grace Period

Little Hands grants a grace period of two weeks following a family's first day of class attendance, during which time the family may submit a Drop Request to withdraw from the class and receive full reimbursement of the Co-op Deposit and the remainder of the prepaid tuition.

Co-op Deposit Refund for Dropped Families

If the family has completed a Maintenance Day, performed the required 20 job hours (or prorated job hours for those enrolling in the Winter Term), and submitted the Job Completion form by June 15, the \$300 Co-op Deposit will be refunded. Early withdrawal past the Grace Period from the Little Hands program does not impact this policy, and the Co-op Deposit will be forfeited regardless of departure date.

Refund of Paid Tuition

If you decide to leave Little Hands and you prepaid tuition, the remaining tuition will be refunded as of the 1st of month after your planned departure. For those on monthly payment plans, you will no longer be billed beginning the month after you stop attending. For instance, if you notify us on October 1st that you plan to leave Little Hands on November 15th, you will be refunded tuition from December 1st onward or will not be billed from December 1st onward. No refunds are provided for missed days (such as days absent, holidays, illness, vacations or school closure). Make-up options for absences are available and should be discussed with the teacher.

LITTLE HANDS PHOTO RELEASE AGREEMENT

From time to time, we photograph the children and parents during classes and other Little Hands events. These pictures are occasionally used in Little Hands yearbooks, brochures, newsletters, posters and on our web site. Although we never list the names of the children or parents, we want to be sure that you are willing to have your child's (or your) picture included in Little Hands publications.

In today's age of technology and cell phone usage, we can never guarantee 100% that your child will not be photographed. Parents snap cute photos on their cell phones and may post on a social media forum. But we as a school will only use photos for the purposes mentioned above. Should any photo be used for external audiences, parents will be contacted for permission.

ACCEPTANCE OF TERMS

I have read and understand the above Parent Responsibilities, Co-op Deposit requirement, Refund Policy, and Photo Release Agreement and acknowledge that as a co-op parent, I will play an active role in the school.

YOUR ONLINE REGISTRATION CONSTITUTES ACCEPTANCE OF THESE TERMS