

South Carolina Department of Social Services
Child Care Regulatory Services

**GENERAL RECORD AND STATEMENT OF CHILD'S HEALTH FOR ADMISSION
TO CHILD CARE FACILITY**

This form is to be completed for each child at the time of enrollment in the child care facility, updated as needed when changes occur, and maintained on file at the facility.

GENERAL INFORMATION: (to be completed by Parent or Guardian)

Name of Facility: Magnanimous Kids Childcare & Learning Center County: Richland
Address: 10115 Farrow Rd. Blythewood, SC 29016
Street Address – no Post Office Boxes City, State, Zip

Child's Name: _____
Last First Middle Initial Nick Name

Date of Birth: _____ Enrollment Date: _____

Child's Current Home Address: _____
Street Address City, State, Zip

Parent/Guardian's Full Name: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

Parent/Guardian's Full Name: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

You must have two individuals who have the authority to obtain emergency medical treatment for the child.

1. Person responsible if parent/guardian unavailable for emergency medical services:

Full Name Relationship
Address: _____
Street Address City, State, Zip
Telephone Number(s): _____ Family CodeWord(s): _____

2. Person responsible if parent/guardian unavailable for emergency medical services:

Full Name Relationship
Address: _____
Street Address City, State, Zip
Telephone Number(s): _____ Family CodeWord(s): _____

Is Child currently enrolled in school? (5K up to 6 years old) Yes No

My Child will regularly attend this facility FROM _____ am/pm TO _____ am/pm

If Child is a drop-in, indicate hours of care: FROM _____ am/pm TO _____ am/pm

Check all days Child will regularly attend this facility: Mon Tue Wed Thurs Fri Sat • Sun

Check all meals Child will receive daily: • Meals are not offered Breakfast Morning Snack Lunch

Afternoon Snack • Dinner • Evening Snack

HEALTH INFORMATION: (to be completed by Parent or Guardian)

Family Physician or Health Resource: _____
Name

Street Address City, State, Zip Telephone

Emergency Care Provider: _____
Emergency Facility Name

Street Address City, State, Zip Telephone

DSS Form 2900 (MAR 10) Edition of OCT 07 is obsolete.

Dental Care Provider: _____
Name

Street Address City, State, Zip Telephone

Health Insurance Provider: _____

Certificate of Immunization: Yes No N/A Please explain: _____

My child has the following health conditions such as allergies, asthma, diabetes, epilepsy, etc., and/or takes the following medications on a regular basis:

Additional Comments: _____

I certify that to the best of my knowledge _____
Child's Name

is in good mental and physical health and able to participate in the child care program at

Magnanimous Kids Childcare & Learning Center

Name of Child Care Facility

Signature: _____ Date: _____
Parent or Guardian

Signature: _____ Date: _____
Director/Operator/Staff Designee

Updated: _____
Updated: _____
Updated: _____
Updated: _____



Time Clock ID # _____

Magnanimous Kids Childcare & Learning Center

10115 Farrow Rd.
Blythewood, SC 29016

Enrollment/Registration Form

Admission Date: ____/____/____

Discharge Date: ____/____/____

Child's Name: _____
(First) (Middle) (Last)

DOB: ____/____/____

Age: ____

Nick Name: _____

Child's Sex: Male Female

Last 4 of Social Security: _____
(Needed for Sign In/Out System)

Address: _____ City: _____ State: _____ Zip _____

Mailing Address: _____ City: _____ State: _____ Zip _____

Parent's Contact Information

Mother/Guardian Info:

Father/Guardian Info:

Full Name: _____

Full Name: _____

Driver's License #: _____

Driver's License #: _____

Email: _____

Email: _____

Employment: _____

Employment: _____

Work Phone: (____) _____ - _____

Work Phone: (____) _____ - _____

Employer's Address: _____

Employer's Address: _____

Authorization for Child Pick-up (Parent's excluded)

Children will not be released to anyone w/out written consent; any person picking up the child who is unknown to Magnanimous Kids is required to show picture ID. (NO EXCEPTIONS)

1. Name: _____ Relationship: _____ Phone: (_____) _____ - _____

Address: _____ City: _____ State: _____ Zip _____

2. Name: _____ Relationship: _____ Phone: (_____) _____ - _____

Address: _____ City: _____ State: _____ Zip _____

3. Name: _____ Relationship: _____ Phone: (_____) _____ - _____

Address: _____ City: _____ State: _____ Zip _____

4. Name: _____ Relationship: _____ Phone: (_____) _____ - _____

Address: _____ City: _____ State: _____ Zip _____

5. Name: _____ Relationship: _____ Phone: (_____) _____ - _____

Address: _____ City: _____ State: _____ Zip _____

6. Name: _____ Relationship: _____ Phone: (_____) _____ - _____

Address: _____ City: _____ State: _____ Zip _____

Please Initial to Consent/Acknowledge the following:
Emergency Medical/First Aid

Initials: _____

- I, parent/guardian of _____, authorize Magnanimous Kids to seek emergency medical care for my child. Care may include transportation to and from the hospital, medical care from a licensed physician in the event that a parent/guardian can't be reached; in addition a certified Staff member @ Magnanimous Kids has my permission to provide First Aid treatment for my child. While it is understood that reasonable precautions will be taken to prevent accident/injury to my child while in attendance at Magnanimous Kids, I will not hold them legally responsible for such accident or injury.

Physical Activity

Initials: _____

- I, parent/guardian grant permission for my child to participate in physical activities indoor/outdoor at appropriate times; including the use of playground equipment and other toys that are used on a regular basis. ** There will be NO Swimming/Wading Pools on Premises** I will not hold the Centre/Caregivers responsible for injuries incurred while using the equipment at the center providing the children are supervised and the equipment is in good repair. (Children are encouraged to be physically active indoors and outdoors at appropriate times. Media (TV, Video & DVD) viewing and computer are not permitted for children ages 2 yrs. and under)

Photo/Publicity/Daycare Website

Initials: _____

- I hereby give permission and authorization to Magnanimous Kids Childcare & Learning Center to use still photographs and videos in which my child may appear for arts & crafts, the daycare website & used in conjunction with promotion and advertising. A child's photograph may not be copied, posted on a web site or disclosed to unauthorized persons, with written consent from the child's parent.

Discipline Acknowledgement

Initials: _____

- Here at Magnanimous Kids CORPORAL PUNISHMENT IS PROHIBITED AND SHALL NEVER BE USED, Regardless of verbal/written authorization from parent(s)/guardian(s). Absolutely No SPANKING, SLAPPING, PINCHING, SHAKING, BITING, JERKING OR POPPING HANDS under any circumstances are allowed on the Center's Premises at any time or by anyone.

SC Code of Laws (Section 20-7-723) Insurance Parental Notice:

Initials: _____

- According to the written code above Magnanimous Kids Childcare & Learning Center must inform Parent's that we will not be purchasing any additional liability insurance besides what is insured on the building. If and when insurance will become effective for this facility parents will be notified.

Social/Emotional Development Questionnaire

Please list Names & Ages of Children in Family Home: _____

What language is spoken at home? _____

What characteristics in your child's development would you like.....

Encouraged? _____

Discouraged? _____

Please provide any additional information relating to your child that would be helpful in understanding and caring for your child: _____

What are your expectations from Magnanimous Kids Learning Center? _____

Policy Handbook Contract Acknowledgment:

It is the Parent's responsibility to read the Online/Offline

Policy Handbook @ www.magnanimouskids.com completely before signing and it's the parent's responsibility to

Abide by all the policies stipulated in the Handbook.

Parent/Guardian Signature(s): _____ Date: ____/____/____

Parent/Guardian Signature(s): _____ Date: ____/____/____

New Enrollees DO NOT INITIAL BELOW THIS LINE

Annual Policy Update (20__)

Initials: _____

- ❖ I have read and understand the policies and procedures included in Magnanimous Kids Childcare & Learning Center Parent Handbook
- ❖ I have read and understand Magnanimous Kids' Discipline & Behavior Policy.

Date: _____

Annual Policy Update (20__)

Initials: _____

- ❖ I have read and understand the policies and procedures included in Magnanimous Kids Childcare & Learning Center Parent Handbook
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Date: _____

Annual Policy Update (20__)

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Date: _____

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Date: _____



Magnanimous Kids Childcare & Learning Center, LLC Financial Agreement Contract

Non-Refundable Registration Fee

This fee is required for each child and will ensure placement on our waiting list.
This fee does not guarantee future enrollment.

I (the parent) have paid a **NON-REFUNDABLE registration** fee of \$ _____
 One child (\$50) and to each sibling (\$25)

I (the parent) have will agree to pay a yearly **NON-REFUNDABLE supply** fee (\$50)
Initial: _____

Tuition payments must be received on payment schedule date. If tuition due dates falls on a Holiday, fees are due on/before the next business day. All outstanding accounts are subject to court and collections. Parents'/Guardian are responsible for all court costs.

Childcare/Preschool Tuition (Initial in tuition box)

Infant(0-12Months): \$165 Weekly	12-30 months \$150.00 Weekly	
Toddler (30-42Months):	\$145.00Weekly	
Pre-School-Potty-trained(3½ yrs. - 5):	\$135.00 Weekly	
Toddler (30-42 Months. PT):	\$115.00 Weekly	
Pre-School/Kinder(3½-yrs.-5 PT)	\$105.00 Weekly	
Before/After-School-Aged(6and up)	\$75.00 Weekly	Previous MagKids Enrolled: Daily Rate: \$30
School Aged Summer Months/Holidays:	\$125.00 Weekly	New Enrollee: Daily Rate: \$35

Please initial the mode of fee payment you have decided on:

- I prefer to pay a monthly childcare fee.
- I prefer to pay bi-weekly childcare fee.
- I prefer to pay a weekly childcare fee.

Make checks payable to **Magnanimous Kids**
Note payments are **non-refundable**—advance payments are credited to accounts)

Additional Agreement Notes:

I (the parent) hereby acknowledge that I (the Parent) am aware of the conditions stated in the Magnanimous Kids Childcare & Learning Center, LLC Financial Agreement, and agree to abide by the above requirements.

Parent full name (print) _____ (Sign) _____

Parent full name (print) _____ (Sign) _____

Director/Co-Director (print) _____ (Sign) _____