

# Mom's Morning Out



## Child Registration Packet

Colonial Baptist Church  
2400 Taylor Ranch Trail  
Venice, FL 34293  
(941) 492-4678

Dr. Kerry Feathers, Pastor

## ***A Message from Our Pastor***

Dear Parents,

We are thrilled that you have chosen the Mom's Morning Out Program here at Colonial Baptist Church.

It is our pleasure to be able to serve you, as well as your children. Our Mom's Morning Out staff are qualified individuals who are dedicated to nurturing and caring for your child(ren) while you are out.

If you ever have any questions or concerns that you would like addressed, please contact me personally or our Church Secretary, Rachel Walker, at 941.492.4678.

In Christ,

Pastor Kerry Feathers

## ***A Message from the Mom's Morning Out Workers:***

Dear Parents,

Thank you for considering our Mom's Morning Out program! Our MMO ministry aims to provide a morning of fun and learning for your child. Mornings are spent learning Bible truths, practicing letters, colors and numbers, working on fine motor skills during craft time and participating in cooperative free play activities.

Mom's Morning Out is for children ages 6 weeks to 5 years old. Our school year will begin on Monday August 20<sup>th</sup>, 2012 and run Monday, Wednesday and Friday mornings from 8:30am to 12:30pm. We currently offer two classes each day, including:

- Infant and Toddler Class (Ages 6 weeks – 3 years)
- Preschool Class (Ages 3-5 years, \*must be potty trained)

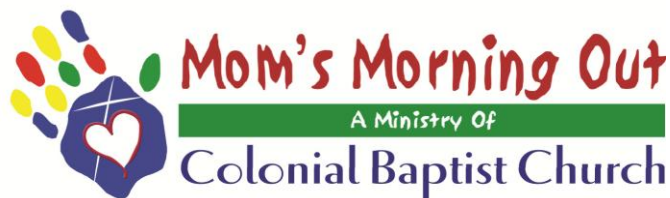
We plan to offer a third class (splitting the Infant (6 weeks – 23 months) and Toddler (2-3 years) classes into separate rooms) as attendance requires and staff allows.

Each classroom is staffed with 2 teachers and has a daily size limit (Infant and Toddler – 15, Preschool – 20). Classes will be filled on a first come, first-served basis.

Our program is self-supporting and we run strictly off donations from MMO parents. It is only by your donations that we can continue to run our program! Everything we receive goes back into our program to provide snacks, supplies and quality care for your child. Any amount that you can give to help cover the expenses associated with running our ministry will be greatly appreciated. A donation basket will be available during drop-off and pick-up times for your convenience.

We have provided any information you might need in this packet, including MMO ministry contact information, policies and procedures, and a school calendar. Please complete and return the enclosed registration form as soon as possible.

We are looking forward to having your child with us!



## CHILD REGISTRATION FORM

Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_  
First Middle Last

Date of Birth: \_\_\_\_\_ M ☐ F ☐

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

How did you hear about Mom's Morning Out: \_\_\_\_\_

Do you attend church: \_\_\_\_\_ Where: \_\_\_\_\_ City: \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Place of  
Employment: \_\_\_\_\_

Place of  
Employment: \_\_\_\_\_

NOTE: In case of divorce or legal separation, state the custody arrangements: \_\_\_\_\_

### EMERGENCY CONTACTS: (other than parents)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I give my permission for the above-named child to participate in all activities. I WILL NOT HOLD Colonial Baptist Church, the pastoral staff, director, teachers, or other parents responsible for any accident, illness, or injury, that may occur to my child while he/she is attending class or while participating in any class activities.

Colonial Baptist Church reserves the right to refuse enrollment of, or to remove from the roster, any child for whatever reason the pastoral staff and director deems necessary for the well being of the program and its staff.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **PICK-UP AUTHORIZATION**

I understand that program policies specifically prohibit the release of my child to anyone other than those designated on this form unless I make other arrangements known to the church/program office, either verbally or in writing.

In case of emergency, I hereby authorize the following persons to pick up the child named on the other side of this form:

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_
2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_
3. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

My child has permission to be released to the care of his/her siblings less than 18 years of age listed below.

1. \_\_\_\_\_
2. \_\_\_\_\_

## **MEDICAL INFORMATION**

Allergies or Special Needs: \_\_\_\_\_  
\_\_\_\_\_

Any existing illnesses or previous serious illness or injury: \_\_\_\_\_

Is your child currently taking any type of medications? ☐ Yes ☐ No

If yes, please list medicines: \_\_\_\_\_

List any chronic medical conditions: \_\_\_\_\_

Has this child been hospitalized in the last 12 months? ☐ Yes ☐ No

If yes, list reason: \_\_\_\_\_

### **MEDICAL RELEASE**

This consent form gives permission to seek whatever medical attention is deemed necessary, and releases Colonial Baptist Church (CBC) and its staff of any liability against personal losses of named child.

I/We the undersigned have legal custody of the student named above, a minor, and have given our consent for him/her to attend events being organized by CBC. I/We understand that there are inherent risks involved in any ministry or childcare service, and I/we hereby release CBC, its pastoral staff, employees, and volunteer workers from any and all liability for any injury, loss, of damage to person or property that may occur during the course of my/our child's involvement. In the event that he/she is injured and requires the attention of a doctor, I/we consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is required from a physician and/or hospital personnel designated by CBC, I/we agree to hold such persons free and harmless of any claims, demands, or suits for damages arising from the giving of such consent. I/We also acknowledge that we will be ultimately responsible for the cost of any medical care should the cost of that medical care not be reimbursed by the health insurance provider. I/We also agree to bring my/our child home at my/our own expense should they become ill or if deemed necessary by the ministry staff members.

Parent/Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **CHILD INFORMATION SHEET**

Child's Name: \_\_\_\_\_

Describe your child's personality (sensitive, shy, outgoing, etc.)?

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Does your child have any special fears? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Does your child usually take naps? ☐ Yes ☐ No

If yes, what time and how long? \_\_\_\_\_

**Infants Only:** What is your child's feeding schedule? \_\_\_\_\_  
\_\_\_\_\_

Is your child potty trained? ☐ Yes ☐ No

Limited Activities (list activities in which child should not participate):

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Is there any information we should know that would help us understand your child better?

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☐ I give permission for my contact information to be printed on a list and distributed to my child's class.

☐ I give permission for the use of pictures of my child for promotional purposes and class activities.

\_\_\_\_\_  
(Parent/Guardian Signature)

Thank you for enrolling your child in Mom's Morning Out at Colonial Baptist Church! Here is the information you will need to assure a great time for your child.

1. You may drop your child off at any time between 8:30am and 9:30am. Classes will be filled on a first come, first-served basis. Classes will close when they reach capacity or at 9:30am, whichever comes first.
2. The sign-in table is located in the foyer of our modular building. Please sign your child in on the form provided. Please be sure that the individual who will be picking up your child is listed on your Pick-Up Authorization Form. You may then escort your child to their classroom door. **Parents should not enter the classrooms at any time.**
3. Please notify staff members of any special needs your child may have for the morning (an emotional state, potty training, an injury, upcoming vacation, etc.).
4. Time in the "thinking chair" is our standard response to disciplinary problems for children two years of age or older. Repeated problems that endanger the welfare of any child or that cannot be handled by the staff will result in a call home for early pick-up.
5. If your child displays symptoms of an illness (vomiting, fever, rash, yellow or green discharge from nose, etc.) please keep him/her at home for at least 24 hours after symptoms cease. If your child displays any of these symptoms during the morning, you will be called to come and pick him/her up.
6. Please send your child with the following items: a change of clothing, weather appropriate attire, diapers and wipes (if needed), a bottle, sippy cup or water bottle, an age appropriate, sufficient lunch that includes an ice pack and everything needed to eat that lunch (silverware, cup, straw, etc.). We do not provide any lunch items nor do we refrigerate or microwave any items. **Please mark all items clearly with your child's name in permanent ink.**
7. Your child may be picked up anytime between 12:15pm and 12:30pm at their classroom door. Please sign your child out on the form provided. This is a legal record of your child's stay with us and requires a signature to be valid. We will check ID when you sign out until we become familiar with you. **Please pick your child up promptly to avoid a late pick-up fee.** Any child remaining in the care of MMO after 12:30pm can be picked up in the church lobby.

If you have any questions or concerns you may contact our Mom's Morning Out program at:

Address: Colonial Baptist Church  
2400 Taylor Ranch Trail  
Venice, FL 34293

Phone: 941.492.4678

Church Secretary: Rachel Walker  
941.492.4678  
[colonialbaptistchurchoffice@verizon.net](mailto:colonialbaptistchurchoffice@verizon.net)

Pastor: Dr. Kerry Feathers  
941. 223.5565 cell  
[cbc-pastor@verizon.net](mailto:cbc-pastor@verizon.net)

## POLICIES AND PROCEDURES

- **Drop-Off:** You may drop your child off anytime between 8:30am and 9:30am, provided their class is not full. **No child will be admitted after 9:30am.**
- **Pick-Up:** You may pick up your child at their classroom door anytime between 12:15pm and 12:30pm. Please arrive promptly to avoid a late pick-up fee. Children will only be released to a parent or an individual otherwise permitted on the pick-up authorization form. ID's will be checked until we become familiar with you.
- **Late Pick-Up Fee:** A late fee of \$1.00 per minute will be due at the time of pick-up anytime after 12:30pm. Children remaining after 12:30pm can be picked up in the main church building.
- **Emergency School Closures:** Mom's Morning Out follows the Sarasota County School District schedule regarding emergency school closures. If the public schools are closed, MMO will also close for the day.
- **Snack:** Snack will be provided for your child each day. Please make sure we are aware of any allergies your child may have.
- **Lunch:** Lunch is provided by the parents and should be sent with your child to MMO. The lunch should be age appropriate and include everything needed to eat that lunch (silverware, cup, straw, etc.). We do not provide any lunch items nor do we microwave or refrigerate any items.
- **Medication:** We do not provide or dispense any type of medication (over-the-counter or prescription).
- **Toys from Home:** Children may not bring toys from home to MMO unless it is on a teacher-approved 'Show and Tell' day. All show and tell items must be small enough to fit in your child's cubby.
- **Illness:** If your child displays symptoms of an illness (vomiting, fever, rash, yellow or green discharge from nose, etc.) please keep him/her at home for at least 24 hours after symptoms cease. If your child displays any of these symptoms during the morning, you will be called to come and pick him/her up.
- **Potty Training:** We will make every attempt to assist you during this process, but if your child is being potty trained he/she must wear a Pull-Up to MMO. Your child must be potty trained to enroll in or move up to the Preschool Class.
- **Labeling:** Please label all your child's belongings clearly with their name in permanent ink.
- **Discipline:** Time in the "thinking chair" is our standard response to disciplinary problems for children two years of age or older. Repeated problems that endanger the welfare of any child or that cannot be handled by the staff will result in a call home for early pick-up.
- **Sign-In/Out:** Each child must be signed in and out each day so we have a record of your child's stay with us. The sign-in/sign-out table is located in the foyer of our modular building. ID's will be checked upon sign-out until we become familiar with you.
- **Payment:** Our program is self-supporting and we run strictly off donations from MMO parents. It is only because of your donations that we can continue to run our program! Everything we receive goes back into our program to provide snacks, supplies and quality care for your child. Any amount that you can give to help cover the expenses associated with running our ministry is greatly appreciated. A donation basket will be available during drop-off and pick-up times for your convenience. If you would like to receive a donation statement for tax purposes at the end of the year, please use the envelopes provided to identify any cash amounts you give.
- **Classroom Entry:** Parents should not enter the classrooms at anytime.
- **Birthdays:** You can bring a special snack in to celebrate your child's birthday if you wish. However, the snack must be store bought, not homemade, for safety purposes. Please give your child's teacher advance notice if you plan to do this.

# MOM'S MORNING OUT | 2012-2013 PROGRAM

JULY 2012						
S	M	T	W	Th	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

JANUARY 2013						
S	M	T	W	Th	F	S
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13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

1 New Year's Day  
7 MMO Resumes  
21 **MMO Closed** –  
M.L. King Jr. Day

20 First Day of MMO

AUGUST 2012						
S	M	T	W	Th	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

FEBRUARY 2013						
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10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28		

18 **MMO Closed** –  
Presidents Day

3 **MMO Closed** –  
Labor Day

SEPTEMBER 2012						
S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
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23	24	25	26	27	28	29
30						

MARCH 2013						
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17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

11-15 **MMO Closed** –  
Spring Break  
29 **MMO Closed**

26 **MMO Closed**

OCTOBER 2012						
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14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

APRIL 2013						
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14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

19-23 **MMO Closed** –  
Thanksgiving Break  
22 Thanksgiving Day

NOVEMBER 2012						
S	M	T	W	Th	F	S
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11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

MAY 2013						
S	M	T	W	Th	F	S
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19	20	21	22	23	24	25
26	27	28	29	30	31	

27 **MMO Closed** –  
Memorial Day  
31 **Last Day of MMO**  
Last Day of School for  
Sarasota County

21-31 **MMO Closed** –  
Christmas Break  
25 Christmas Day

DECEMBER 2012						
S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

JUNE 2013						
S	M	T	W	Th	F	S
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16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						