



## **OPERATING POLICIES**

1350 CODY ROAD NORTH  
MOBILE, ALABAMA 36608  
(251) 344-0898



## **Our Mission Statement**

Enhancing the lives of children in a **positive, safe, Christian environment** while providing educational opportunities to strengthen their learning experience.

## **Our Belief**

It is the belief of Noah's Ark Child Care and Development Center that every child deserves a high-quality early childhood program that addresses the spiritual, social-emotional, language, cognitive, and physical aspects of a child's development. Our goal is to collaborate with each parent to ensure that your child has the best experience possible



## OPERATING POLICIES

1350 CODY ROAD NORTH  
MOBILE, ALABAMA 36608  
(251) 344-0898

---

## ENROLLMENT AND TUITION

---

### **ENROLLING YOUR CHILD:**

When you enroll your child with us, you are required to complete the enrollment registration information packet. These forms give us the vital information about your child so that we can provide the best possible care. It is imperative for your child's health and safety that all forms are accurately completed and submitted to us for review before your child's first day. There may be other state-specific forms that must be completed as well.

Within the enrollment registration information packet, you will be asked for telephone numbers where you can immediately be reached. Please notify us as soon as any of these numbers change. For your child's health and safety, we must be able to quickly reach you while your child is in our care. You will also be required to provide us with the names and telephone numbers of at least three other persons that you authorize to pick up your child from us. They must be 18 years old or older. No person under this age will be able to pick-up or sign in or out including siblings of the day care. Please inform these persons that when they come to pick up your child, they must bring a valid government issued identification with them. Your child will not be released to them without a valid picture identification.

While completing the enrollment registration information packet, you will be asked to sign an enrollment agreement that explains the terms and conditions of enrollment along with our fees. In addition to tuition, we require a non-refundable annual registration fee. Tuition payments are due each Monday (or the first day of ATTENDANCE) for the current week. Hours of care are from 6:00 a.m. to 6:00 p.m. Monday through Friday. Fees are \$135 a week (6 weeks-17 months) and \$125 (18 months-2.5 years old). There is a \$75.00 registration fee which is non-refundable.



The application fee only holds your child's spot for 1 week and your application fee payment will only be activated for 30 days. After 30 days, then you will

be required to pay another application fee. Anytime rendered past the agreed time is considered overtime. The overtime fee is \$1.00 per minute. **NSF Fee:** Noah's Ark charges a \$30 service fee on any check or automatic bank draft that is returned. After the second NSF is received, all payments must be made by cash, debit or credit card, or money order.

### **GENERAL LATE FEE:**

---

Late payment fees will be assessed if all tuition and other charges are not paid on or before the due date. Late pick-up charges will also be assessed to parents who leave their children beyond the regular closing time. If you are unable to pick-up your child before the daycare scheduled closing time, please call us as soon as possible.

### **CHILD ABSENCES:**

---

If your child is going to be absent, you must notify us; if your child is ill, you must notify us as to the nature of the illness, particularly if it is contagious. No credit, refund, or make-up days shall be made for occasional absences. Tuition must still be paid in full.

### **RESERVATION FEE:**

---

If your child is going to be absent for a week (i.e. vacation) a reservation fee of 50% of your regular week's tuition will be granted for each absence of one full week (Monday – Friday) with advance notice to the daycare. If a child is absent 3 days without a legitimate excuse, that child's place will be filled, if fees are not paid. If you choose to withdraw your child, he or she will only be eligible for readmission based upon space availability and if all other enrollment criteria are met; including a payment of a non-



refundable registration fee at the current rate. Children must be signed in at arrival and signed-out daily at departure.

Meals to be served: Breakfast, lunch, and snack

No child can attend after 9:00 am except with a doctor's note.

All children must have these forms upon entering:

1. Child pre-admission record
2. Immunization

These records must be updated periodically:

1. Immunization form

Parents of infants will be required to supply formula, food, wipes, and disposable diapers. PLEASE label all formula and food with your child's name.

Children are required to have a clean change of clothing each day.

Should any child become ill or develop a temperature while at the center, the parent/guardian will be notified immediately so he/she may be picked up, not only for health and care, but also as not to endanger the health of other children.

We will administer medication or ointments upon request.

---

## **ILLNESS/INJURY:**

We will report promptly to parent/guardian:

- 1.) Any suspected illness or other changes observed in the health of the child;
- 2.) Any exposure to a contagious diseases
- 3.) Changes in behavior or appearance
- 4.) Any skin rashes and itchy skin or scalp
- 5.) Any boils or weeping skin rashes
- 6.) Signs of fever, such as flushed appearance or shivering



- 7.) Complaints of pain or not feeling well
- 8.) Vomiting, diarrhea, or drainage from eyes

If we observe your child developing symptoms of illness during the day, we will call the parent. If they cannot be reached, we will try the person on the contact list. If no one is reached we will take to Emergency Room.

## **ALLERIES:**

---

If your child is allergic to any foods, or latex product please give me a list of them. Your child safety is your responsible concerning their allergies.

## **DISCIPLINARY PRACTICES:**

---

Discipline shall be appropriate to the age and developmental level of the children.

Corporal or physical punishment, verbal abuse, discipline associated with food, naps or bathroom procedures, physical restraints or punishment administered by another child is prohibited.

**WE DO NOT HAVE PETS OR A POOL.**

---



## **OUR HOLIDAYS ARE:**

---

NEW YEARS DAY AND THE DAY AFTER

WINTER BREAK MONDAY AND TUESDAY

MARTIN LUTHER KING JR DAY

PRESIDENT'S DAY

MEMORIAL DAY

INDEPENDENCE DAY

LABOR DAY

THANKSGIVING DAY AND THE DAY AFTER

**CHRISTMAS DAY AND THE DAY AFTER**

---

If any of the above observed holidays fall on a Saturday, we will be closed the preceding Friday. If any observed holiday falls on a Sunday, we will be closed the following Monday.

No allowances, credits, refunds, or make-up days shall be made for holiday closing. Tuition must still be paid in full.

Emergency closing and inclement weather information will be given with this packet for parents called emergency procedures.

Please do not bring any valuables that you and your child treasure, such as favorite books, jewelry, or toys from home. Please help your child understand why it is not wise to bring toys or other objects to daycare that they may not wish to share with the group. We cannot be responsible for lost or damaged items.

---



## **HOLIDAY AND BIRTHDAY:**

---

Your child's birthday is a special day for him or her and for us. We encourage you to bring nutritious snacks or cupcakes for birthday treats that are purchased. Food made at home cannot be brought into the daycare to ensure safety of children who may have food allergies. We are happy to acknowledge your child's birthday, and will gladly make your child feel special. Please make arrangements for birthday celebrations at least one week in advance with the director.

## **SAFE SLEEPING POSITION:**

---

In accordance with the recommendations of the American Academy of Pediatrics, and as a policy of DHR, we place infants on their backs to sleep. If you request that your infant sleep in a different position other than on his or her back, a physician's note is required on company stationery. For the safety and security of infants, blankets shall not be used in this sleeping environment.



Noah's Ark Child Care and Development Center Application

**This section is to be completed by the child's parent or guardian.** This form must be kept in the child's file in the Child Care Facility (home/center). Child's Name: Name child is known by:

Child's birthdate:	Child's home address:
Name(s) of parent(s)/guardian(s):	Home telephone number: (    )
Address of parent(s)/guardian(s):   	
Mother's employer:	Father's employer:
Employer's address:	Employer's address:
Employer's telephone number: (    )	Employer's telephone number: (    )
List telephone numbers such as beeper, cellular phone, etc.	Instructions regarding how parent/guardian may be reached in an emergency:

**Person(s) to be contacted in an emergency if parent(s)/guardian(s) cannot be reached:**

Name	Relationship to child	Address	Telephone Number

Name of child's doctor:	Address:	Telephone number:
-------------------------	----------	-------------------

**Emergency Authorization:** I give permission for the child care facility to obtain emergency medical treatment, including emergency transportation, for my child if I cannot be reached immediately. I agree to be responsible for any emergency medical expenses incurred. (If parent/guardian refuses to sign, instructions must be attached stating what procedure the facility is to follow in an emergency.)

## Signature

Date

Form not valid without signature of child's parent/guardian/Page one of two-form not valid without second page



*Noah's Ark Child Care Application (continued) - page two of two - form not valid without first page*

**Describe any special needs or instructions below:**


**Person(s) the child may be released to:**

Name	Relationship to Child	Address	Telephone Number

**I understand that the Department of Human Resources does not inspect activities away from the child care facility (home or center). The licensee of the child care facility assumes full responsibility for such activities.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_

Signature of parent/guardian

Date

**I give permission for my child to participate in:** (Circle yes or no and sign each line)

Activities away from the facility:	<input type="checkbox"/> yes	<input type="checkbox"/> no	Signature of parent/guardian	Date
Transportation provided by the facility:	<input type="checkbox"/> yes	<input type="checkbox"/> no	Signature of parent/guardian	Date
Swimming/wading activities provided by the facility:	<input type="checkbox"/> yes	<input type="checkbox"/> no	Signature of parent/guardian	Date

**Form not valid without signature of child's parent/guardian in each space indicated above.**

**This section is to be completed by the facility's staff.**

Child's first day of attendance: \_\_\_\_\_ Child's withdrawal date: \_\_\_\_\_

*Additional information may be attached.*



## AUTHORIZATION FOR ADMINISTERING MEDICATION/MEDICAL PROCEDURES

Dear Parent/guardian,

Your written permission is required to administer medication or medical procedures to your child. Any prescription drug or over-the-counter drug sent to the child care facility (home or center) must be in its original container and must be clearly labeled with your child's name, the name of the drug, and directions for administering the drug. A new authorization form is needed each week. If it is absolutely necessary for your child to be given medication while at the child care facility, **please complete the following information.**

**Child's Name** \_\_\_\_\_

**Prescription Number** \_\_\_\_\_

**Name of Medication** \_\_\_\_\_

**Amount of medication to be given at each dosage** \_\_\_\_\_

**Instructions (how to give or apply, such as given by mouth, apply to skin, inhale, drops in eyes, etc.)** \_\_\_\_\_

**Time and date of last dosage given at home** \_\_\_\_\_

**Time(s) of dosage(s) to be given at the child care facility** \_\_\_\_\_

*Please give my child the above-named medication at the time(s) and in the amount(s) indicated.*

\_\_\_\_\_  
**Signature of parent/guardian Date**

To be completed by licensee/staff/caregiver:

Date medication given	Time medication given	Signature of person giving medication



---

## OPERATING PROCEDURES ACKNOWLEDGEMENT

---

**I HAVE READ THE DOCUMENT ENTITLED “NOAH’S ARK CHILD DEVELOPMENT CENTER OPERATING POLICIES,” AND HAVE RECEIVED A COPY OF THE OPERATING POLICIES.**

---

PARENT OR LEGAL GUARDIAN’S NAME (PLEASE PRINT)

---

SIGNATURE (PARENT OR LEGAL GUARDIAN)

DATE

---

CHILD’S NAME (PLEASE PRINT)

---

CHILD CARE DIRECTOR’S SIGNATURE

DATE



## EMERGENCY PROCEDURES

### **Evacuation**

---

1. The Director or designated person in charge will contact 911.
2. Children's emergency contact numbers will be taken to the evacuation area and parents will be notified of the situation. (Orchard Elementary School)
3. Post a message on the front door of the facility or on the answering machine informing parents where the children have been relocated.
4. Use the nearest clear exit to evacuate the building during all continuous alarms.
5. Ensure the Director or designee has a fully charged, working cell phone to contact parents and/emergency personnel.
6. Know two evacuation routes.
7. Calmly walk to the outside assembly area located in the field unless the wind is blowing smoke or other hazards in that direction. Be cautious and yield the way for emergency vehicles entering the property.
8. At the assembly area, staff will immediately take a head count of each classroom to ensure that everyone is present and accounted for. Lead teachers shall report the final head count to the Director or designee. Names of any missing children or missing personnel must be given to the Director and emergency official.
9. Do not re-enter the building until you are given the "ALL CLEAR" command. Many times the situation must be verified as safe, so be patient. Remember, this is for your protection.
10. Medical supplies including children's medication and emergency contact information should be taken when facility relocates.

### **Lockdown**

---

1. Lock outside doors and windows.
2. Close and secure interior doors.
3. Close any curtains or blinds.
4. Turn off lights.
5. Keep everyone away from doors and windows. Stay out of sight, preferably sitting on floor.
6. Maintain calm atmosphere in room by reading or talking quietly to children.
7. If phone is available in classroom, Director or designated person in charge will call 911 to ensure emergency personnel have been notified.
8. Remain in lockdown until situation resolved and police give the all clear.



\*Notify parents/guardians about any lockdown, whether practice or real.

### **Shelter-In Procedures (Tornado/Severe Weather i.e. thunderstorm, ice storm, etc.)**

---

1. An emergency radio with extra batteries is located in the NURSERY CLOSET.
2. If a severe weather watch is issued staff will gather children at the shelter-in place located at: Orchard Elementary | 6400 Howells Ferry Road | Mobile, AL 36618
3. Lead teachers will take a head count to ensure all children are accounted for. Names of any missing children or missing personnel must be given to the Director.
4. Children will sit with their backs to the wall and heads tucked between knees during a tornado warning.
5. Staff will keep children calm by reading books and singing songs.
6. Ensure the Director or designee has a fully charged, working cell phone. If possible, the Director will make contact with all parents to let them know of the situation.
7. No children are allowed to leave the Center while a severe weather watch is in effect without the legal parent or guardian.
8. When the threat has passed, staff may continue with the daily schedule.

### **Lightning**

---

1. If outside- move indoors immediately.
2. Avoid use of telephone, electrical appliances, and plumbing as much as possible. (Please note: wires and metal pipes can conduct electricity)
3. Move away from windows. Cover windows with shades or blinds, if available.

### **Fire**

---

1. If heavy smoke or flames are seen or if the fire detector is sounded staff will line up with children at the nearest exit door.
2. A head count will be conducted of all children.
3. Teachers should search their rooms and close all doors before leaving. Additionally the Director or designee will search all areas within the Center and ensure all occupants have been safely evacuated.
4. Children will be escorted outside in a single file line.
5. Children will be taken to the designated assembly area located at the field.
6. Emergency personnel (911) will be contacted by the Director after all persons have been evacuated.



7. At the assembly area, teachers will immediately take a head count of each classroom to ensure that everyone is present and accounted for. Lead teachers shall report the final head count to the Director or designee. Names of any missing children or missing personnel must be given to the Director and emergency official.
8. Ensure the Director or designee has a fully charged, working cell phone to contact parents and/emergency personnel.
9. Parents will be contacted (i.e. phone, email, text) to be made aware of the situation.
10. If the building cannot be reentered then all children will be taken to the designated evacuation area located at name: Orchard Elementary | 6400 Howells Ferry Road | Mobile, AL 36618.
11. If necessary, all parents and emergency contacts will be contacted via phone to arrange for pick up.

## **Structural Damage**

---

1. Staff will line children up at the nearest exit door.
2. A head count will be conducted of all children.
3. Teachers should search their rooms and close all doors before leaving. Additionally the Director or designee will search all areas within the Center and ensure all occupants have been safely evacuated.
4. Children will be escorted outside in a single file line.
5. Children will be taken to the designated assembly area located at the field.
6. Emergency personnel (911) will be contacted by the Director after all persons have been evacuated.
7. At the assembly area, teachers will immediately take a head count of each classroom to ensure that everyone is present and accounted for. Lead teachers shall report the final head count to the Director or designee. Names of any missing children or missing personnel must be given to the Director and emergency official.
8. Parents will be contacted (i.e. phone, email, text) to be made aware of the situation.
9. Building will only be reentered if emergency personnel gives the all clear.
10. If the building cannot be reentered then all children will be taken to the designated evacuation relocation site at name: Orchard Elementary | 6400 Howells Ferry Road | Mobile, AL 36618.
11. Medical supplies including children's medication and emergency contact information should be taken when facility relocates.



#### **\*Loss of Water**

---

1. Bottled water will be provided to wash hands, flush toilets and for drinking
2. A supply of bottled water is kept in the Nursery Closet.
3. The Director or designated person in charge will contact the water company for assistance if applicable. The phone number 251.694.9400.
4. Parents will be contacted (i.e. phone, email, text) to be made aware of the situation.
5. If the water will not be restored with-in 8 hours then all parents and emergency contacts, if necessary will be contacted via phone to arrange for pick up.
6. The program will remain closed until water is restored.

#### **\*Loss of Electricity**

---

1. Flashlights are kept Nursery Closet for emergency use.
2. Curtains and blinds will be opened to provide light.
3. The Director or designated person in charge will contact the power company for assistance. Alabama Power
4. If the Center also losses the cooling system then see emergency plan below.
5. Parents will be contacted (i.e. phone, email, text) to be made aware of the situation.
6. The Director will make a determination on if the Center can operate safely. If necessary, all parents and emergency contacts will be contacted via phone to arrange for pick up.

#### **\*Loss of Heat**

---

1. Children will be made comfortable by putting on coats and outer garments.
2. The Director or designated person in charge will contact a HVAC company for assistance.
3. Parents will be contacted (i.e. phone, email, text) to be made aware of the situation
4. If the temperature of the building drops to 65 degrees Fahrenheit or lower the program will then close. All parents and emergency contacts, if necessary will be contacted via phone to arrange pick up.

#### **\*Loss of Cooling System**

---

1. Children will be made comfortable by removing excess clothing and opening windows.
2. The Director or designated person in charge will contact a HVAC company for assistance.
3. Parents will be contacted (i.e. phone, email, text) to be made aware of the situation.



4. If the temperature of the building rises to 85 degrees Fahrenheit or higher the program will then close. All parents and emergency contacts, if necessary will be contacted via phone to arrange pick up.

#### **Heatwave**

---

1. Ensure everyone drinks plenty of water.
2. If loss of air-conditioning occurs, follow emergency plan for loss of cooling system.

---

PARENT'S SIGNATURE

DATE

---

CHILD CARE DIRECTOR'S SIGNATURE

DATE



## DAILY SCHEDULE

---

6:00 a.m.	7:15 a.m.	ARRIVAL, FREE PLAY
7:15 a.m.	7:30 a.m.	CLEAN-UP/WASH
7:30 a.m.	8:30 a.m.	BREAKFAST/DIAPER CHANGE/BATHROOM
8:30 a.m.	9:30 a.m.	CIRCLE TIME (STORY TIME, MUSIC, SONGS)
9:30 a.m.	10:00 a.m.	LEARNING ACTIVITIES
10:00 a.m.	10:30 a.m.	WASH/MID-MORNING SNACK
11:00 a.m.	11:30 a.m.	OUTDOORS PLAY
11:30 a.m.	12:30 p.m.	WASH, LUNCH, DIAPER CHECK/CHECK
12:30 p.m.	2:30 p.m.	REST TIME
2:30 p.m.	3:30 p.m.	WASH, SNACK
3:30 p.m.	5:30 p.m.	CHANGE CLOTHES/FREE PLAY
5:30 p.m.	6:00 p.m.	PICK-UP/DEPARTURE