



City of Buckeye – Community Services
Dr. Saide Recreation Center – 1003 E. Eason Ave. 623-349-6350



Kid's B.A.S.E. Program

2020-2021

Kid's B.A.S.E. is now accepting registrations contingent on the re-opening of schools. We will enroll your child, however, weekly billing will not be processed until the school districts give us the green light to proceed with on-campus programs. Weekly communication will be sent out to those registered via email.

The Kid's B.A.S.E. (**B**efore and **A**fter **S**chool **E**nrichment) Program provides a safe and exciting place for children to be during out-of-school time. The mission of the program is to provide an environment that keeps youth safe while preparing them for success. Our creative programming will enhance self-confidence, self-expression, social skills and cognitive skills while keeping youth physically active.



Participants: The Kid's B.A.S.E. Program is a part-day care program for students in grades K-8.

When:

BESD Schools:

First day of school – last day of school
Monday – Friday
AM Care: 6:00 am – until school starts
PM Care: End of School – 6:30 pm

Tartesso Elementary:

First day of school – last day of school
Mondays: 6:00am – 6:30 pm
Tuesday- Friday; No AM Care
PM Care: End of School – 6:30 pm

The program is open at dismissal time for early release days and parent conference days, however will be closed on national and school holidays.

BESD School's Fees:

During this registration period as we wait for the schools to open, the registration fee will be waived and first week's attendance will be billed once the official start date has been determined.

AM Care: \$7/day or \$30/week
PM Care: \$12/day or \$55/week

Tartesso Elementary Fees:

During this registration period as we wait for the schools to open, the registration fee will be waived and first week's attendance will be billed once the official start date has been determined.

Monday Care: \$25/child
PM Care: \$12/day or \$45/4 days (Tuesday-Friday school schedule)
Monday-Friday: \$70/week

Billing:

Bills will be **emailed** weekly on Wednesday for the following week's care. Payments are due every Friday prior to the week of attendance. Accounts not paid on Friday will be assessed a \$10 late fee and emailed a late bill. Accounts not paid by the end of the day Tuesday will be dis-enrolled from the program.

Important: Because all billing communication will be done via email it is imperative that you keep your account information up to date. You can access your account online at www.buckeyeaz.gov/rec.

How to make payments:

- Due to COVID-19, payments can only be made online or by enrolling in Auto Pay.
- Credit card payments may be made **online at www.buckeyeaz.gov/rec**
 - **Accounts can be set up for Auto-Payments with a valid credit or debit card.**
Payments through Auto Pay will be charged each Monday for the full amount due on the account for that week of care.

Change of Attendance Contracts

It is the City of Buckeye Kid's B.A.S.E. Program Policy that prior notice is required to terminate or change enrollment in the program. If for any reason you decide to change or drop your child's enrollment from the program, notification and a change of contract must be submitted by **Friday** for the following week to release you from your current contract. This will allow for adjustments in staffing, supplies, and snacks.

Changes in contract must be submitted electronically and can be found at www.buckeyeaz.gov/rec .

Due to COVID-19, children can NOT attend on a drop-in basis. Schedules must be submitted by the Friday prior to the week of attendance.

B.A.S.E. Site Locations and phone numbers:

Email address is recreation@buckeyeaz.gov

Bales Elementary- Room P43

25400 W. Maricopa Rd.
Buckeye, AZ 85326
623-694-3707

Inca Elementary- Gym

23601 W. Durango St.
Buckeye, AZ 85326
623-764-4474

Jasinski Elementary- Gym

4280 S. 246th Ave.
Buckeye, AZ 85323
623-694-7198

Marionneaux Elementary- Stage

24155 W. Roeser Rd.
Buckeye, AZ 85326
480-800-9000

Sundance Elementary- Room G109

23800 W. Hadley Rd.
Buckeye, AZ 85326
480-800-7930

Tartesso Elementary- Gym

29677 W. Indianola Ave.
Buckeye, AZ 85396
480-208-1570

Westpark Elementary (space limited)

Students will be transported to Jasinski
After school only-Bus #7

Buckeye Elementary (space limited)

Students will be transported to Inca
After school only-Bus #41

Refunds

The City of Buckeye Community Services Department Kid's B.A.S.E. Program will not issue any refunds regardless of withdrawal, illness, absence, suspension or expulsion.

Enrollment

For your child(ren) to be enrolled in our program we must receive the following:

1. \$25 registration fee.
2. First week's attendance fees.
3. Fee attendance contract. **Must be signed.**
4. Discipline policy and waiver. **Must be signed.**
5. Blue Immunization Card. Complete, leave no line blank. If the question/line does not apply, write "none" or "N/A". Each child must have 2 emergency contacts who have different phone numbers than each other or the child, besides the 2 parents/guardians authorized to pick-up your child in case of an emergency.
6. If there are current custody issues that affect the child's pick-up and/or emergency procedures a copy of legal custody documentation is required.
7. Copy of immunization record from state licensed approved source (not from elementary school)

Child(ren) will not be able to begin attending the program until all necessary paperwork is filled out COMPLETELY. Child(ren) may begin attending the program **48 business hours** after all completed paperwork is turned in to recreation office. Registration can be done online by filling out the registration packet and emailing it to recreation@buckeyeaz.gov. Along with the registration packet, a copy of your child's immunization record must also be submitted in order to complete your registration. Your child's registration will NOT be complete until all items are received and filled out correctly. If you have questions, please call 623-349-6350.

Dis-enrollment

To dis-enroll your child(ren) from the Kid's B.A.S.E. Program, a Change of Contract form is required. If your child(ren) has not attended for 2 weeks without prior notification, your child(ren) will be automatically withdrawn and the payment for the 2 weeks will remain due on your account. Reenrollment with payment of the \$25 registration fee and any past due amount will be required to attend again.

DES Funding

The City of Buckeye Kid's B.A.S.E. Program is a DES contracted child care program. Call 623-925-0095 to find out if you qualify for child care assistance.

Sign In/Out

Sign In: Due to COVID-19, regulations for this process have been changed until further notice.

Site staff will sign child in to the program in lieu of a parent or authorized person. **A child may not sign themselves in.** The site staff are authorized to sign the child in from class after school.

Sign Out: Due to COVID-19, regulations for this process have been changed until further notice.

Site staff will sign child in to the program in lieu of a parent or authorized person. **A child may not sign themselves out.** The site staff are authorized to release the child for class at the start of school.

A child enrolled in the Kid's B.A.S.E. Program will only be released to those persons authorized with their actual signature on the registration form. NO exceptions will be made without the advance written permission of the parents or telephone authorization. Individuals will be required to show proof of I.D. to the staff when the child is picked-up. If one person has the sole custody of a child, a legal document must be on file with the site stating the name of the legal guardian.

Due to COVID-19, the program will be inaccessible to parents/guardians or visitors unless there is an emergency. You must make prior arrangements with the site staff to visit any Kid's B.A.S.E. site.

Late Pick-Up

A late charge of \$15 per every 15 minutes after the scheduled ending of the program (per the school clock) will be assessed for the late pick up of participants (i.e. 6:31-6:45=\$15; 6:46-7:00=\$30 and so on). Late pick-up fees must be paid prior to the return of the participant.

- 1st Time:** Verbal warning
- 2nd Time:** Fee plus written warning
- 3rd Time:** Fee plus 3 days suspension
- 4th Time:** Removal from the program



Absences

If your child will not be attending the Kid's B.A.S.E. Program as scheduled, please call your child's Kids B.A.S.E. site and notify his/her teacher. **Refunds will not be issued for days missed unless change of contract form is filled out the Friday prior to absence.**

Illness

It is important for parents who have children in the Kid's B.A.S.E. Program to understand that their child's health affects the health of other children and staff members in the program. **Stay home if you are sick.** DO NOT BRING YOUR CHILD(REN) to the Kid's B.A.S.E. Program if they have any of the following signs or symptoms of being ill:

1. Fever (100.4). Participants must be fever free for 72 hours in order to return
2. Any contagious disease such as COVID-19, lice, strep throat, pink eye, chicken pox, etc.
3. Vomiting
4. Serious/hard coughing or difficulty breathing
5. Rash/sores
6. Diarrhea
7. Mucus or pus from red eyes
8. Thick drainage from the nose
9. Sore throat

If your child becomes ill during the program, a staff member will attempt to contact a parent or authorized designee to pick-up the participant and child will be placed in a safe and isolated area.

NEW COVID-19 Guidelines

Entry Guidelines for all (staff, parents and participants):

- Contactless parking Lot Drop Off and Pick Up.
 - All parents/guardians must stay in their vehicles when dropping off/picking up their child.
 - Site staff will sign participant in and out of the program in lieu of authorized individual.
 - If parent/guardian or authorized person need to enter the building, please call the site phone and staff will allow access. Will need to follow all entry guidelines.
- Temperature checks will be conducted daily for staff, participants and visitors.
 - If temperature is 100.4 or greater, access will not be granted to program.
- All staff, participants and visitors will be required to complete a health screening questionnaire: (if answer is yes to any of the below questions, access will not be permitted)
 - Does the child have respiratory infection symptoms such as fever, diarrhea, sore throat, shortness of breath and cough?
 - Has the child been in a facility or exposed to person with a recognized positive COVID-19 case?
 - Traveled within the last 14 days to affected areas? (per CDC travel website)
- Masks will be required at all times.
- Upon entry into site all will be required to wash hands for at least 20 seconds with soap and water.
- Reservations will be required for all parents and visitors to enter site. A visitor sign-in/out log required for contact tracing.
- Participants are required to be up to date on all vaccinations (per DHS guidelines) to attend.

Classroom Guidelines:

- Participant will have their own set of supplies.
- Participant seating will be identified to allow for social distancing separation.
- Hand washing breaks will be every hour and will be determined by site schedules.
- Shared equipment will be minimized and will be cleaned/disinfected after each use.
- Participant belongs will be placed in participants designated area.
- Hand sanitizer stations will be at each site.
- After school snacks will be individually packaged and prepared by school food service staff.
- Participants are to bring their own water bottles, labeled with child's name. Drinking fountains will be off and not available.

Cleaning & Disinfecting Guidelines:

- Daily cleaning schedule for staff to clean common areas and frequently touched areas such as tables, chairs, doorknobs, etc.
- School cleaning staff will disinfect and clean bathrooms, floors as well common area each evening.
- Site staff will use Lysol cleaning wipes, Lysol spray and a bleach-and-water solution (0.1% solution; 1:48 dilution).
- All equipment will be cleaned and disinfected prior to opening and closing as well as after any use.

Medication

Kid's B.A.S.E. Staff may administer medication. The parent/guardian must complete a Medication Release Form and bring the prescribed amount of medication in the original container to authorize giving medication to a child. Forms are available at the site. Please make arrangements with your site leader to obtain this form.

Emergencies

If your child has an accident, injury or emergency while at the Kid's B.A.S.E. program that requires medical treatment by a health care provider, a staff member will immediately notify the child's parents. For this reason, it is essential that all forms have current names and phone numbers. A written emergency report will be completed.

Phone Number Changes

Please notify staff if phone numbers change at any time during the program. If contact numbers are inoperable, you will be given 3 business days to provide the program with replacement numbers or contacts before being automatically withdrawn from the program. Re-enrollment with payment of the \$25 registration fee and any past due amount will be required to attend again.

Toilet Training

Child(ren) **MUST** be toilet trained. Occasionally, accidents will happen, however if your child has frequent urine and/or bowel accidents occur (3 or more within 5 day period) or wears pull ups, then they do not meet this requirement. Please understand that if your child does exhibit signs of not being fully toilet trained, you will be

asked to remove your child from the program. If an accident happens, a parent or guardian is expected to either pick up the child or bring change of clothes/cleansing products within 1 hour from the time parent/guardian is notified. If a child has 3 consecutive accidents or a total of 5 non-consecutive accidents, he/she may be disenrolled from the program.

Meals

Afternoon snack is provided. Additional snack may be provided by parent. Snack menu will be sent out to via email to parents on a weekly basis.

Tartesso site has an all day camp option on Mondays and early release days where parents will need to provide their child with a lunch. Please see school calendar for these dates.

All students are to bring their own water bottles, labeled with the child's name. Due to COVID-19, access to drinking fountains will not be allowed.

Transportation

Transportation will not be provided by the City of Buckeye. If a B,A,S,E. site is not located on your campus such as Westpark Elementary or Buckeye Elementary, transportation will be provided by Buckeye Elementary School District to transport child to B.A.S.E. site. This is for after school program ONLY.

Child's Personal Property

The City of Buckeye cannot be responsible for lost, stolen, or broken property. It is **strongly** recommended to leave all valuables at home. These items cannot be shared among participants.

Cell Phone Use by Participants

As we do not prohibit the use of cell phones at our Kids B.A.S.E. Programs, it is the understanding that children must keep their cell phone use limited to calling parents/guardians in emergency situations. There will be limited free time when participants can use their phones at their own discretion; however, it must not be done in a group setting as we do not monitor what is being played or seen on each individual cell phone. This is a conversation the parent must have with their child as to what is considered appropriate. Sharing devices is absolutely NOT allowed.

Licensing

City of Buckeye Kid's B.A.S.E. Program is regulated by the Arizona Department of Health Services, located at 150 N. 18th Avenue, Suite 400, Phoenix, Arizona, 85007, phone number (602) 364-2536. Inspection reports are completed by DHS and are available at the BASE site upon request.

Special Needs

Parents/Guardians of special needs youth should contact Christa Lancaster at 623-349-6318 regarding enrollment to better prepare for any needed accommodations.

Insurance

The City of Buckeye carries liability insurance for all its operations, including City-sponsored recreation programs. Documentation of insurance is available for review at BASE site.

Pesticides

If pesticides are sprayed on the premises, notification will be posted at least 48 hours before the pesticide is applied by the school.

Communication

Parent is responsible for communicating with the child's teacher and their child's school office to ensure the child is at the appropriate location at the end of the school day (i.e. parent pick-up, bus rider or Kids BASE).

What is a Typical Day at the Kid's B.A.S.E. Program?

The Kid's B.A.S.E. program has weekly themes that are designed to captivate your child in various projects, activities and educational lectures. Our experienced, trained and qualified staff will provide stimulating programming to fit your child's interests while also keeping them physically active throughout the day.

Typical Before School Activities: 6:00 am – School Starts

- Check in with site leaders
- Activities include arts and crafts, motor skill development, and creativity.
- Group projects that will develop teamwork skills.
- Group gym and outside games that promote physical fitness.
- Children are released to the playground/cafeteria when school campus opens.

Typical After School Activities: End of School Day – 6:30 pm

- Check in with site leaders
- Homework Hub
- Nutritious snack
- Group projects that will develop teamwork skills.
- Activities include arts and crafts, motor skill development, and creativity.
- Group gym and outside games that promote physical fitness.
- Activities to promote pride and ownership in classroom and create friendship

Typical All Day Activities: 6:00 am – 6:30 pm

- Check in with site leaders
- Nutritious breakfast and snack
- Group projects that will develop teamwork skills.
- Activities include arts and crafts, motor skill development, and creativity.
- STEM activities
- Group gym and outside games that promote physical fitness.
- Activities to promote pride and ownership in classroom and create friendships.

Holiday and Vacation Days

The City of Buckeye Kid's B.A.S.E. Program will be closed on all school holiday, in-service days, and vacations unless otherwise advertised.

Early Release and Parent/Teacher Conference Days:

When school releases the children early, the program will open at the dismissal time to accommodate these children. Please check with the school and staff for the early release schedule.

The City of Buckeye will offer break camps during Fall Break, Winter Break and Spring Break at one location. Registration will need to be done separately from Kids B.A.S.E. Break camps are subject to change or cancel due to COVID-19 or any other unforeseen circumstances.



City of Buckeye Kid's B.A.S.E. Attendance Contract



This form must be completed and submitted with the registration form.

I hereby agree to accept full responsibility for payment of all registration and miscellaneous fees required for my child/children to attend the Kid's B.A.S.E. Program.

Participant's Name: _____ School: _____ Start Date: _____

Parent/Guardian Email: _____

	MON	TUES	WED	THURS	FRI	Cost times # days	Weekly Fee
Please "X" ALL AM's attending						\$30/week or \$7/day	
Please "X" ALL PM'S attending						\$55/week or \$12/day	
Please "X" ALL days attending Tartesso						Tartesso ONLY \$25/Mondays or \$12/day or \$45/week for T-F or \$70/week/for M-F	
							Total
							\$

Initial I understand that the entire contracted fee is due weekly, regardless of absences. Refunds or credits will not be given for days missed.

Initial If for any reason there is a school closure or school holiday care is charged at a daily rate.

Initial I understand that my child's fee is based on days/week enrolled, and that payment is due the **FRIDAY** prior to the week of participation or a penalty of \$10 will be assessed per child. Auto pay must be set up with debit/credit card.
o Debit/Credit card payments may be made **online at www.buckeyeaz.gov/rec**.

Initial I also understand that a late pick-up fee will be assessed at the rate of \$15 for every fifteen minutes past 6:30 p.m. (i.e. 1-15 minutes, \$15, 16-30 minutes, \$30, etc.)

WITHDRAWAL / CHANGE POLICY (Change of Contracts)

Initial I understand in order to terminate or change enrollment in the program notification and the change of contract must be made electronically by **Friday** for the following week to release you from your current contract.
o **Changes in contract must be made electronically at www.buckeyeaz.gov/rec**

Initial I understand that my child has to have a set schedule no later than the Friday prior to the week of attendance. Due to COVID-19, Drop-in scheduling will not be permitted.

Initial I understand that it is **MY** responsibility to notify my child's teacher of my child's after school schedule.

Initial I understand that there are **NO REFUNDS OR CREDITS FOR ABSENCE, ILLNESS, OR SUSPENSIONS**

Initial I understand that if my child has not attended for 2 weeks without prior notification, my child will be automatically withdrawn and the payment for the 2 weeks will remain due on your account. Reenrollment with payment of the \$25 registration fee and any past due amount will be required to attend again.

Initial I understand that drop off and pick up will be contactless. Drop off and pick up will be done from my (or authorized person) vehicle. If I drop off or pick up my child outside of the given time frame, I am to call the Kids BASE site to allow access to the program. A health check will be done by site staff prior to entering the building.

Initial I understand that during these times of COVID-19, Kids B.A.S.E. will adhere to contactless drop off and pick up procedure. Site staff will be signing my child in and out of the program in lieu of a parent/guardian and/or an authorized individual.

**City of Buckeye Kid's B.A.S.E.
Discipline Policy**

To ensure the safety of all participants and staff, the City of Buckeye staff will implement an assertive discipline program. Children involved in our program are expected to follow the rules and direction of the Kid's B.A.S.E. site staff. The following are guidelines used when disciplinary action becomes necessary due to unacceptable behavior.

1. Warning for specific unacceptable behavior.
2. Separation from group with a warning of future consequences for repeated behavior.
3. Separation from group with a warning and write-up for repeated behavior.
4. Separation from group with a call to parent or guardian and a write-up.
5. Parent/Guardian conference to discuss corrective action and consequences for future incidents.
6. Suspension. 1 to 2 scheduled days from the program and /or the remainder of the day. **(NO REFUND FOR SUSPENSION OR EARLY PICK-UPS ON SCHEDULED DAYS).**
7. Repeated aggressive / inappropriate behavior with 3-5 suspensions will result in removal from program with approval from Recreation Coordinator and Manager.

Some actions will result in an automatic suspension or dismissal from the program. Parents / Guardians will be contacted immediately to pick-up their child from the program. The participant will be suspended for the following day(s) and/or dismissed from the program. The following are actions that will result in automatic suspension or dismissal.

1. Showing extreme disrespect or disruption (abusive language).
2. Damaging the recreation site (school or bus) or supplies or stealing property.
3. Endangering another child or staff verbally (threats) or physically (hitting, spitting, biting, throwing objects, etc.).

The City of Buckeye Community Services Department reserves the rights to withdraw a participant from the program if all discipline options have been exhausted and/or demonstration of extreme behavior that may put participants and staff in danger (i.e. verbal or physical actions including fighting, threats).

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I have read and agree with the Kid's B.A.S.E. Discipline Policy and waivers and fully understand the process to be used for discipline issues.

Participant Name

Teacher's Name

Grade

Parent/Guardian Signature

Date

COVID-19 Release, Waiver of Liability, and Indemnity Agreement

In consideration of permission to use City of Buckeye's ("City") facilities, buildings, equipment, parks, recreational areas, pools and amenities (collectively, City Facilities), **I acknowledge and affirm on behalf of myself, and on behalf of any of my participating children, that:**

I/We shall not visit or utilize the facilities if experiencing symptoms of COVID-19, including, without limitations, fever, cough, or shortness of breath, or have a suspected diagnosed case of COVID-19

To the fullest extent allowed by law, I/We agree to comply with all federal, state, and local laws, rules, regulations, executive, and/or emergency orders, and to follow the protocols as directed by the Centers for Disease Control and Prevention and the Arizona Department of Health Services, arising from, addressing, or related to COVID-19.

I/We acknowledge that the City has taken steps to implement federal and state guidance for COVID-19. Due to the nature of the facilities, physical distancing of six (6) feet may not be possible. The undersigned fully understands and appreciates both the known and potential dangers of use of the facilities and acknowledges that despite the city's efforts to mitigate such dangers, use of the facilities may result in exposure to COVID-19, which could result in quarantine, serious illness, disability and/or death.

Release and Waiver of Liability. The undersigned, on his or her behalf and on behalf of participating children, hereby releases, waives, discharges and covenants not to sue the City, its officers, employees, volunteers, and any of its agents from all liability to the undersigned and such participating children and all personal representatives, assigns, heirs, and/or successors of the undersigned or such participating children whether caused by negligence, active or passive, of the City or otherwise while the undersigned or such participating children are in, upon, or about the Facilities or participating in any City program or event at the Facilities.

Indemnity. The undersigned agrees to indemnify and hold harmless the City from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of the undersigned's use, or his or her participating children's use, of the Facilities and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing COVID-19 Release, Waiver of Liability, and Indemnity Agreement is intended to be as broad and inclusive as is permitted by the law of the State of Arizona and that if any portion of the agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

The undersigned has read the foregoing COVID-19 Release, Waiver of Liability, and Indemnity Agreement and requests use of the Facilities. By signing below, the undersigned agrees to each and every term of the COVID-19 Release, Waiver of Liability, and Indemnity Agreement.

I/we hereby release and forever discharge the City of Buckeye, its elected and appointed officials, directors, officers, boards, commissions, agents, representatives, servants and employees from any and all claims of any kind or character which I/we have or may have against them due to my participation, or my child's participation, in a City of Buckeye recreation program. The waiver includes all damages, losses, costs, expenses, and injuries that allegedly occur during the course of the recreation program. In that regard, I/we consent to indemnity, defend and hold harmless to the fullest extent permitted by law the foregoing persons and entities from any loss or damages, including reasonable attorney's fees and litigation expenses, which may be incurred by them in the event any such claims are asserted against them or any of them. I/we understand that medical claims are my/our responsibility. I/we give permission for my child to be videotaped or photographed by the City of Buckeye employees to be used at the site for activities and for any program advertisements for the City of Buckeye.

Parent/Guardian Signature

Date

City of Buckeye Auto Pay Authorization Form

The City of Buckeye offers an auto-pay option for your weekly program fees. This option allows you to pay your account every Monday with your debit or credit card. This service is free of charge. Please complete the below form to authorize the Auto Pay program for your account.

Child's Name: _____

Date: _____

Parent's Name: _____

Parent's Email address: _____

Phone Number: _____

BASE Site: _____

Weekly Schedule: (Please Circle)

AM: Monday Tuesday Wednesday Thursday Friday

PM: Monday Tuesday Wednesday Thursday Friday

Auto Pay MUST be set up at the time of registration. If card is declined two consecutive weeks, auto pay will be removed from account and \$25 registration fee will be added.

You are hereby authorized and requested, until otherwise instructed, to charge the referenced account, the weekly attendance fee. I understand that if a transaction is DECLINED, a courtesy email and /or phone call will be attempted at the email address/numbers listed on the account. I further understand that I am responsible for payment and I am aware that if the transaction is declined that penalties will be applied and will not be waived.

I understand that a request to discontinue or change this service must be made in writing one week prior to the anticipated charge date.

Signature

Date



CDC/SGH# or name: _____

**Arizona Department of Health Services
Bureau of Child Care Licensing
Emergency, Information and Immunization Record Card**

Child's Name:	Date Enrolled:	Updated:
Home Address (#, Street, City, State, Zip Code):		Date Disenrolled:
Home Phone:	Date of Birth:	Sex: <input type="checkbox"/> male <input type="checkbox"/> female

Parent or Guardian Name:	Home Address (#, Street, City, State, Zip Code):
Cell Phone (optional):	Contact Telephone Number:

Parent or Guardian Name:	Home Address (#, Street, City, State, Zip Code):
Cell Phone (optional):	Contact Telephone Number:

**I authorize the following individuals to collect my child from the facility in case of emergency or if I cannot be contacted:
(Pursuant to R9-5-304.B, at least two contact persons are required.)**

Name:	Contact Telephone Number:

If Medical care is necessary, call:

Health Care Provider*	Name:	Contact Telephone Number:
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*A Health Care Provider is a physician, physician assistant or registered nurse practitioner.

I hereby give authority to any hospital or doctor to render immediate aid as might be required at the time for his/her health and safety.

In case of injury or sudden illness, I request that this individual be called first:	
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The following individual(s) may NOT remove my child from the facility:

Name(s):

Custody papers have been provided and are on file at the facility. yes no

Telephone Authorization Code (optional): _____

Immunization Information

(A licensee shall attach an enrolled child's written immunization record or exemption affidavit to the enrolled child's Emergency, Information and Immunization Record card.)

For information regarding current immunization requirements go to:

www.azdhs.gov/phs/immun/index.htm or contact the Arizona Immunization Program Office at (602)364-3630.

One of these items must accompany the EIIR card at all times:

<input checked="" type="checkbox"/>	Copy of current official documented immunization record attached
<input checked="" type="checkbox"/>	Religious Beliefs exemption form signed by parent/guardian attached
<input checked="" type="checkbox"/>	Medical Exemption form signed by physician and parent/guardian attached
<input type="checkbox"/>	Signed Laboratory Proof of Immunity form attached

Notification of immunizations needed sent to Parent(s) or Guardian(s):	mo /day/ yr	mo /day/ yr	mo /day /yr
Updated immunizations received and attached:	mo /day/ yr	mo /day/ yr	mo /day /yr

Medical Information

<p>Is child allergic to food or other substances? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, describe symptoms, name foods or substances to be avoided, and the procedure to follow if reaction occurs:</p>
<p>Is child usually susceptible to infections and if so, what precautions need to be taken? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, list precautions:</p>
<p>Is child subject to convulsions and what should be our procedure if one occurs? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, specify procedure:</p>
<p>Is there any physical condition that we should be aware of and what precautions should be taken (heart trouble, foot problem, hearing impairment, hernia, etc.)? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, list precautions:</p>
<p>Additional comments:</p>
<p>Other special instructions:</p>

This **Emergency Information and Immunization Record Card** is accurate and complete, front and back, and was provided by:

Parent/Guardian PRINTED Name:	SIGNED Name:	DATE:
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