Icebreakers
Christian Academy

PARENT HANDBOOK

DAYCARE/PRESCHOOL

WHERE LOVE AND LEARNING MEET

WELCOME

Dear Parents and Families,

Welcome to Icebreakers Christian Academy! We are thrilled to have you as part of our daycare. At Icebreakers Christian Academy, we believe that the early years of a child's life are some of the most important in their development. Our mission is to create a nurturing, fun, and safe environment where each child feels valued, respected, and inspired to explore, learn, and grow.

As the operator/director, I am committed to fostering a collaborative partnership between myself and you, the parents. I understand that you are your child's first and most important teacher, and we recognize that a strong partnership between home and school is key to supporting each child's unique learning journey.

Our goal is to make you feel welcome, informed, and involved in your child's educational experience. Please don't hesitate to reach out with any questions or concerns. We are here to listen and collaborate with you every step of the way.

Thank you for choosing Icebreakers Christian Academy. We look forward to a wonderful year of growth, discovery, and joy!

ENROLLMENT CONTRACT

This is a child care agreement between:

Icebreakers Christian Academy

AND:

Parent's name: _____

Contact number/s: _____

Parent's name: _____

Contact number/s: _____

Address: _____

_____

_____

For the care of the following child(ren): List full name(s) and current age(s)

_____

_____

_____

Emergency contact (in the event a parent cannot be reached):

_____

_____

_____

OTHER NOTES:

ENROLLMENT CONTRACT

Employment Information - Financial Details

Parent's name: _____

Employer Name/Phone/Address: _____

_____

Parent's Name: _____

Employer Name/Phone/Address: _____

_____

Family Household Income (Please Circle One)

- Below $25,000 year
- 25,000 to 50,000 year
- 50,000 to 75,000 year
- 75,000 to 100,000 year
- 100,000 to 125,000 year
- 125,000 and above

OTHER NOTES:

ENROLLMENT CONTRACT

Terms of agreement are as follows

Days of care: _____

Hours of care: _____

There will be a fee of $_____ per week, payable in advance, no later than Friday at 6:00 pm eastern before childcare the next week.

Early starts/late pick-ups (any time before or after regular hours) will be charged a fee of **$1.00** for every **1 minute** you are early/late. This fee is expected to be paid promptly on the day you are early/late.

There will be an added fee of $35.00 for any checks returned NSF. Should the NSF result in any charges to my bank account, you will be expected to cover all costs on top of the $35.00 fee. Once the fee is paid, you will receive a grace period for the first check returned. A second Non-Sufficient Funds check will result in all fees paid strictly in cash. 2 meals and 2 snacks are provided for children over 12 months of age and included in the weekly rate. Parents are asked to provide the following:

_____

_____

My policy regarding a child who is absent:

No fee will be charged for children absent their scheduled day. However, advance notice of 24 hours must be given. No notice means the daily rate will be applied, and you will be expected to pay.

Holidays: The following are considered days off and paid holidays for the provider provided they fall on a regular day of care (Mon-Fri):

New Year's Day | MLK Jr. Day | Good Friday | Memorial Day | Juneteenth | Fourth of July | Labor Day | Veterans Day | Thanksgiving | Day after Thanksgiving | Christmas Eve | Christmas Day | Winter Break 2026 (December 26-30) | New Year's Eve

My vacation policy is as follows:

I take three or four weeks off every year. You will be given a minimum of two weeks notice. There is no charge while I am on vacation.

DAYCARE PRICING

	FULL TIME (WEEKLY RATE)	PART-TIME (DAILY RATE)	HOURLY RATE (DROP IN RATE)
Infants (6 weeks -12 mos.)	$200.00	$40.00	$10.00
Toddlers (12-24 mos.)	$187.50	$37.50	$10.00
Pre-Schoolers (24-60 mos.)	$175.00	$35.00	$10.00
School-age (5 and up)	TBD	TBD	TBD
Two-child Family	TBD	TBD	TBD
Three-child Family	TBD	TBD	TBD

Full-Time (Weekly Rate) = Monday-Friday (8-10 hours/day)
Part-Time (Daily Rate) = 2-3 Days a week (8-10 hours/day)
Drop-In (Hourly Rate) = 1 day or less a week

$50 Registration Fee + First week tuition (Based on child's age) is due before childcare.
You will be billed every Wednesday for the upcoming week. Payment is due every Friday. If payment is not received on Friday before 6:00 pm, childcare will not be provided. Every new child will start at Icebreakers Christian Academy on Friday.

No refunds. Your account will be credited as necessary.

Parent Signature / date

ENROLLMENT CONTRACT

Should your child(ren) take a vacation, a two-week notice is required. You will not be charged, but your child's spot will not be saved if someone else comes along to pay. To secure your child's spot you can pay the fee while you're on vacation.

In the event of termination of care by either party, there is a required two-week notice. The last two weeks of tuition will need to be paid, or your account will be reported as having a balance and legal action will be taken.

During the two-week notice time frame, you will be expected to pay each week in full, regardless of whether your child attends daycare or not. There is a two-week trial period, during which either party may terminate this agreement at any time. At the end of the two-week trial period, the contract will be in full effect. This contract will be up for renewal in 6 months. The undersigned agree to the terms of this contract.

Required documents, such as birth certificates, medical records, custody agreements, and immunization records will need to be submitted before childcare is provided.

_____ _____

Parent Signature / date **Parent Signature / date**

_____

Provider Signature / date

HOURS & CALENDAR

Regular Hours:
Monday – Friday: 7:00 AM – 6:00 PM

Early Drop-off Option:
We will be registered and insured for 7:00 am - 6:00 pm. If you drop off before this time, an additional fee of $1.00 per 1 minute will be applied.

Please be mindful that care can only be provided during these times, and backup care should be sought in the event of an emergency.

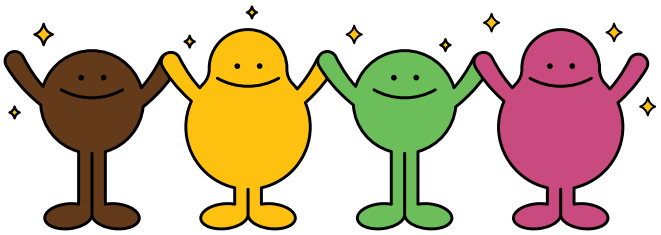
Late Pick-up Option:
We will be registered and insured for 7:00 am - 6:00 pm. If you pick up after this time, an additional fee of $1.00 per 1 minute will be applied.

Please be mindful that care can only be provided during these times, and backup care should be sought in the event of an emergency.

Drop-In Hours (if applicable):
Drop-in childcare is available to families that are specifically signed up for drop-in care. This does not apply to Full-Time and Part-Time families. Drop-in care is not guaranteed and is only available based on the availability of the daycare.

Drop-in childcare is only available during regular business hours.

DAYCARE POLICY HANDBOOK



Welcome to our daycare! As this space becomes a second home for your child, my commitment is to create a secure, nurturing, and home-like environment that fosters their physical, intellectual, emotional, and social development. I encourage you to review the policies of our daycare for a comprehensive understanding. Your child's well-being and growth are our top priorities, and I look forward to partnering with you on this journey.

Family Child Care License: To provide child care, I have met all requirements according to the State of Florida and agreed not to exceed capacity, according to § 402.302(7), Florida Statutes).

NONDISCRIMINATION

I will not discriminate concerning admissions of any child based on race, creed, color, national origin, religion, sex, or disability.

HOUSE RULES

No shoes past the foyer/backpack area gate. This means children and parents.

The children will be taught by example to have respect for themselves and each other. They will also be taught to respect my home, property, and possessions.

Any negative behavior will not be allowed. This includes but is not limited to hitting, punching, kicking, biting, standing or jumping on furniture, throwing anything in the house, and foul language, etc.

DISCIPLINE

I will strive to offer praise for good behavior. Should negative behavior happen, I will deal with it in one of three ways.

Redirection: Toddlers will simply be told "no", and redirected to another activity or area.

Talking: Once a child reaches the age of 18 mos. they can be talked to. They will be told in easy-to-understand terms why the behavior should not continue. Typically, this is highly effective.

DAYCARE POLICY HANDBOOK

Time-out: Should the behavior continue, the child will be placed in a time-out chair. I use the one minute per age of the child rule (a three-year-old gets three minutes). Should a behavior continue after a few time-outs, I will talk to the parent. A workable solution can almost always be found.

DROP OFF/ PICK UP CHILDREN

Please arrive on time. If you will be late for drop-off/pick-up, let me know as soon as possible, so I may adjust my schedule if need be. All children over the age of 12 months are expected to arrive fully dressed and ready for the day. Do not bring your child in pajamas. Your child(ren) should be awake or able to wake up upon arrival.

At drop-off time, make sure that you say goodbye to your child(ren) and let them know when you will be returning. Although this may produce tears, rest assured that by the time you are out of the driveway, the tears have stopped. This also helps to make the child feel secure in that while you may leave them when you have to, you are coming back.

At the moment you walk in to pick up, you are in charge of your child(ren). Sometimes children will "test" to see who is really in charge. A child who has been well-behaved all day will suddenly bounce all over the house when a parent arrives. The respect that you show me, my home, and my possessions will speak volumes to your child.

When you drop off or pick up, do not linger. Five minutes is typically more than sufficient. During daycare hours, I have a job to do. If you need to talk to me, I am available to speak with you at a scheduled time suitable for both of us.

FEES

I am paid weekly. Fees are expected in advance. Billed on Wednesday and expected to be paid on Friday by 6:00 pm Eastern Time. Should you have a two-week/monthly pay period, it is your option to pay me in advance for the two or four weeks or pay me weekly by Friday at 6:00 pm Eastern Time.

My daycare has regular hours. Notify me as soon as possible if you will be arriving early/late. Early/late, meaning any time before/after regular scheduled hours. An early/late fee of **$1.00** for every **1 minute** will apply. These fees are expected to be paid immediately (same day).

I do accept checks. Should I receive an NSF returned to me, you will be charged a fee of $35.00, including any costs my bank imposes upon me. A second NSF will result in all payments being made in cash. Fees are expected to be paid whether or not your child attends daycare.

DAYCARE POLICY HANDBOOK

I require a two-week written notice if you are terminating child care. If none is given, two weeks' additional payment must be made, whether or not your child is present. If I find I can no longer provide care for your children, I will give you at least a two-week notice.

SAFETY

Your child's safety is paramount. All lower cabinets (kitchen and bathroom) have safety locks. Upper cabinets that could pose a problem (i.e. medicine cabinet) are also locked. All electrical outlets have child-proof safety covers. I have smoke detectors and carbon monoxide detectors on each floor and a fire extinguisher in the kitchen. Emergency numbers are posted on the parent board. I also have two first aid kits, several flashlights/lanterns, and a portable battery-operated radio. Tornado/storm and fire drills are practiced monthly and logged. They are also posted on the parent board.

I have taken classes in Infant/Child CPR and First Aid, child car restraint safety, SIDS prevention (Back to Sleep Program), and a class to help reduce the risk of Shaken Baby Syndrome.

CLOTHING

Do not send your child to daycare in "dress clothes". Play clothes only. Although I try my best to keep the children clean, even in the best of circumstances accidents can happen. Make sure your child has a complete change of clothing here at all times, including underwear and socks. Please provide a different change of clothes should the one here be used or if the season changes. Provide a summer-type jacket to be left here. Please do not buy a new jacket for this purpose. A hand-me-down from an older sibling or a thrift store find is good enough. Occasionally in the warmer months, a child will come without a coat, due to the warmer temperature in the morning. Should the day turn chillier, he/she will still be able to play outside in comfort.

Do not bring your child in sandals or flip-flops. Only shoes that cover the entire foot should be worn. During the summer months, I will on occasion make use of a wading pool, sprinkler, or water toys. You will be notified in advance. Please provide a swimsuit or swim diaper if you wish for your child to participate. During the winter months, make sure your child has the appropriate clothing. This includes a jacket, pants, boots, mittens, and a hat (a hood that ties is not a substitute for a hat). If your child does not have the appropriate clothing he/she will not be able to play outside. If you would like to leave a spare hat and mittens here, please feel free to do so. Per DCF, we are required to take children outside every day. Please send the necessary items they need.

DAYCARE POLICY HANDBOOK

MANDATED REPORTING

As a registered childcare provider, I am a mandated reporter. All providers must report suspected physical abuse, sexual abuse, or neglect of a child to the agency or police as required by 39.201, F.S. This is simply listed to make you aware. In the event you have concerns about my care, you may contact The Office of Childcare Regulation, and/or The Department of Children and Families.

QUIET TIME

Every day between 12:00-4:00, we have quiet time. All younger children will lie down to rest/nap. Older children (school age 5+) will be given quiet time activities (coloring supplies, puzzles, movies, etc.). I ask that you keep visits and phone calls during this time to a minimum.

Items from home: Please do not allow your child to bring anything into the daycare setting. No toys, candy, snacks, money, etc. unless noted in the child profile for a special diet.

MEALS AND SNACKS

All food served during the day will include servings from each basic food group as specified by the United States Department of Agriculture. Breakfast is served at 8:30 am. If you will be arriving later than 8:00 am, please see that your child(ren) has eaten breakfast before arriving. There will be a snack served at 10:00 am, lunch at 11:00-11:30 am, and another snack at the end of quiet time.

No supper will be served to daycare children unless we have a prearranged agreement. If any food or bottles are brought from home, they must be clearly labeled with the child's name. It is important to let me know if your child has any known food allergies.

TRANSPORTATION

We do not provide transportation at this time.

DIAPERS AND WIPES

Diapers and wipes are provided by us.

DAYCARE POLICY HANDBOOK

SICK POLICY

I will notify you immediately should your child develop any of the following symptoms:

- The underarm temperature of 100 degrees Fahrenheit or over, or the oral temperature of 101 degrees Fahrenheit or over (no rectal temperature will be taken).
- Vomiting or diarrhea (2 or more).
- Any rashes other than a mild diaper or heat-related rash.

Should your child develop any of these symptoms, you will be expected to pick up your child within one hour. If this is not possible, you will need to have another person listed on your emergency information form who can. You will also be called at my discretion should your child appear to be uncomfortable, regardless of whether other symptoms have appeared.

I'm not willing to accept a child with any of the above-listed symptoms. Symptoms must be gone for 24 hours before re-admittance without medication.

I will not take a child with confirmed lice unless the hair has been washed with an approved product twice (24 hours apart). I will check the child's head personally upon arrival. Should I find anything, your child will not be allowed to stay. Also, no child with green snot, open bruises/wounds, hand/foot/mouth disease, etc. will be allowed to stay.

IMMUNIZATIONS

All children in my daycare must have the appropriate immunizations for their age or written notarized documentation on the immunization form opposing immunizations.

MEDICATIONS

Before administering prescription medication, I must have written permission and instructions for each medication. Medicine with the child's name and current prescription information on the label constitutes instructions.

Non-prescription medications will be administered with parental permission according to the manufacturer's instructions unless written instructions are from a licensed physician. Parents must sign a permission slip for each medication.

DAYCARE POLICY HANDBOOK

SLEEPING

Each child will be provided with a safe comfortable sleeping space with separate bedding. Infants will sleep in porta cribs with waterproof mattresses or pads. I will sleep infants on their backs according to the recommended guidelines from the American Academy of Pediatrics for SIDS. If your baby needs to sleep on their stomach or in an unauthorized sleeping arrangement, you must obtain a written statement from a doctor.

EMERGENCIES/ BACK-UP

If for any reason, I need to leave for an emergency, I have an adult who can come in for a short period of time until you arrive. In the event, that I am ill or on vacation, and cannot provide care, you will need to have your own backup arrangements available. I will notify you as soon as possible, when I am unable to provide care for your child.

Should your child require emergency medical attention, I need written permission to follow any steps necessary for his/her well-being. I will notify you at the earliest possible time. You will be responsible for all medical expenses incurred.

SUPERVISION

I am required to be within sight or hearing of an infant, toddler or preschooler at all times so that the caregiver is capable of intervening. For school-age children, I am required to be available for assistance and care. Written permission is needed from you if your school-age child is to be off my property. This includes walking to/from the bus stop or school.

AUTHORIZED PERSONS

Occasionally, your child may need to be picked up from care by someone other than a parent/guardian. Unless the names are listed on your emergency forms, your child will not be released. In case of an emergency, please provide a reliable list of people to reach.

PARENTS IN DAYCARE:

You have the right to stop in anytime during your child's regular daycare hours. You do not need a reason. You are welcome to pop in any time. This is only if your child is in care.

DAYCARE POLICY HANDBOOK

SMOKING

Smoking is not allowed in or near my home.

DAYCARE FORMS

All forms must be completed before the first day of care. All weekly fees must be paid before the start of care in any given week. If forms are not completed or fees are not paid, no care will be provided.

INSURANCE:

I am required to inform you that I have limited general liability coverage.

The undersigned have read and agree to abide by Icebreakers Christian Academy Policies.

_____

Parent Signature / date

_____ _____

Parent Signature / date **Provider Signature / date**

EMERGENCY / HEALTH INFORMATION

Child's Full Name _____

Date of Birth _____ Age _____

Address _____

_____

Parent Name _____

Contact number/s _____

Parent Name _____

Contact number/s _____

Emergency Contacts: (Name & Phone number)

Contact no. 1 _____

Contact no. 2 _____

Child's Doctor

_____

Address _____

_____

Contact number/s _____

List any problems: (ex. Surgeries, allergies and communicable diseases child has had, etc.

_____

Parent Signature / date

_____

Parent Signature / date

ACKNOWLEDGMENT OF RECEIPT OF REGISTRATION HANDBOOK/DAYCARE POLICIES

I acknowledge I have received a copy of the Registration Handbook/Policies.

Parent Signature / date	**Provider Signature / date**

I understand that I may visit this family childcare home unannounced at any time during the hours that my child is in care.

Parent Signature / date	**Provider Signature / date**

ALL ABOUT MY CHILD

Child's Full Name _____

Age _____ Nickname _____

Height _____ Weight _____

Has your child been in daycare before? ☐ Yes ☐ No

If Yes, name of the provider _____

Previous provider address and contact number _____

_____

Date care was provided _____

Reason care was terminated _____

Eating habits

Does your child have a special diet? ☐ Yes ☐ No

Are there any foods that should not be served to your child? Please list the food and the reason.

_____

_____

_____

Your child's favorite foods _____

_____

Least favorite _____

Does your child eat independently? ☐ Yes ☐ No

For infants, what brand of formula do you use?

_____

Does your child require

☐ Bottle ☐ High chair

☐ Sippy cup ☐ Booster seat

Sleeping habits

Does your child have regular bedtime schedule?

☐ Yes ☐ No

What time does your child usually wake up in the morning?

_____

What time does your child usually go to bed at night?

_____

Important Notes

PLEASE KEEP ME HOME IF...

I have had diarrhea or vomiting in the last 24 hours

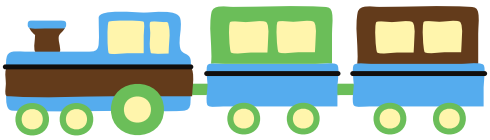
I have a fever of 100.4° or higher

I have a rash of unknown origin

I have an eye infection

I have head lice

I am feeling unwell



TRANSPORTATION FORM

I/We give permission for my/our child _____

to leave the daycare residence in the company of Icebreakers Christian Academy

This signed statement includes emergency transport, field trips, errands, etc. at the discretion of the child care provider.

Should travel take place by vehicle, the driver shall hold a current driver's license, and the vehicle will be registered and insured according to state law.

_____ _____

Parent Signature / date **Parent Signature / date**

_____

Provider Signature / date

NON PRESCRIPTION MEDICATION

Child's name _____ Date _____

I authorize my child care provider _____

use the following products on my child according to the manufacturer or a physician's written instructions. I will not hold the above named provider liable when the products are used according to these terms.

Parents are responsible for providing the following items. All items must be in the original container and clearly labeled with the child's name.

Please check the box yes or no and add a brand name where necessary

Baby Wipes:

☐ Yes ☐ No Brand _____

Notes _____

Diaper Ointment

☐ Yes ☐ No Brand _____

Notes _____

Baby Lotion/ Powder

☐ Yes ☐ No Brand _____

Notes _____

Sunscreen

☐ Yes ☐ No Brand _____

Notes _____

Insect Repellent

☐ Yes ☐ No Brand _____

Notes _____

First Aid Ointments

☐ Yes ☐ No Brand _____

Notes _____

_____ _____

Parent Signature / date **Provider Signature / date**

OVER-THE-COUNTER MEDICATION FORM

Name _____ Date _____

Height _____ Weight _____

I give my permission for, _____

to use the following over-the-counter or external preparations as needed according to the directions for use on the container. Note: If the directions for use are not specific on the container, (such as Tylenol for a child under the age of 2), I will need a physician's note with the appropriate dosage.

✳ **Denotes items that must be supplied by parents.**
All must be in the original container clearly labeled with the child's name.

✳ ☐ Acetaminophen

✳ ☐ Ibuprofen

✳ ☐ Benadryl

✳ ☐ Baby Wipes

✳ ☐ Baby Lotion

✳ ☐ Baby Powder

✳ ☐ Sunscreen

✳ ☐ Insect Repellent

☐ Band-Aids

☐ Neosporin or similar Ointment

☐ Bactine or similar First Aid Spray

_____

Parent Signature / date

PERMISSION TO ADMINISTER PRESCRIPTION MEDICATION

Child's Full Name _____ Date _____

Medication Name _____

Dosage _____ Times of Dosage _____

Any special instructions (take with food, on an " as needed" basis, etc.)

_____

_____

Start date of prescription _____ End date of prescription _____

Possible side effects _____

_____

Rx Number _____

Name of Pharmacy _____

Pharmacy Address _____

_____

Pharmacy Phone _____

Name/Phone of prescribing Physician

_____

Other Notes:

I release Icebreakers Christian Academy from any liability from administering this medication.

(name of provider)

_____

Parent Signature / Date

**All prescription medication must be in the original container clearly labeled with the child's name and dispensing instructions.*

CHILD PICK-UP AUTHORIZATION

Name : _____

Address: _____ City/State: _____ Zip: _____

Relationship : _____

Phone # : _____

Additional persons who may pick up my child(ren) on a less frequent basis:

Name : _____

Address: _____ City/State: _____ Zip: _____

Relationship : _____

Phone # : _____

Name : _____

Address: _____ City/State: _____ Zip: _____

Relationship : _____

Phone # : _____

Any person(s) NOT authorized to pick up my child(ren) :

_____

_____

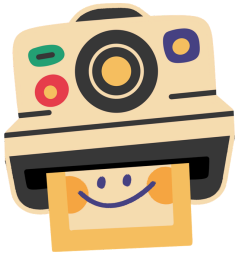
_____

_____

Note: Any person unfamiliar to me will be required to show proof of identification. Under NO circumstances will the child be released to anyone other than those listed above without WRITTEN permission from the parent.

Mother's Signature : _____ Date : _____

Father's Signature : _____ Date : _____



DAYCARE PHOTO RELEASE FORM

I, _____ the parent of a child/children at Icebreakers Christian Academy (Hereinafter known as the "Daycare"), agree to the following

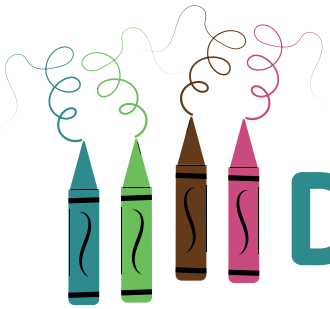
I understand that my child(ren) whose name(s) are listed below may be photographed at the daycare during normal daycare hours, field trips, or activities. I understand that these photographs may be used in promoting child care services, either in print or on the internet.

The child(ren) are known as: _____

With my signature below, I grant permission for my child(ren) to be photographed, or their images recorded for print or electronic use in promoting the daycare's services. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect during the term of my child's enrollment. I understand that this form will remain in effect during the term of my child's enrollment. I understand that there will be no payment for me or my child's participation in this release.

Parent/Guardian Signature: _____ **Date:** _____

Relationship to Child: _____



Icebreakers Christian Academy

Daycare Schedule

7:00	Drop off / Free play
7:30	Drop off / Free play
8:00	Breakfast + Clean up
8:30	Circle Time + Bible Study
9:00	Learning Activities
9:30	Learning Activities
10:00	AM Snack + Clean up
10:30	Outdoor Play
12:00	Lunch + Clean up
1:00	Quiet Time (Rest Time)
4:00	PM Snack + Clean up
4:15	Pick Up / Free play
4:30	Pick Up / Free play
5:00	Pick Up / Free play