



Drop-In Childcare Agreement & Policies

1. ENROLLMENT FORM

Child's Full Name: _____
Date of Birth: _____
Parent/Guardian Name(s): _____
Phone Number(s): _____
Email Address: _____
Home Address: _____
Emergency Contact (other than parent): _____
Authorized Persons for Pickup: _____

2. LIABILITY WAIVER

I understand that Heima Nest & Nook provides drop-in childcare services and that my child will participate in a range of physical and social activities. I hereby release, waive, and discharge Heima Nest & Nook, its owners, employees, and volunteers from any and all liability arising from injury, illness, or accident incurred while my child is in care, except in cases of gross negligence.

3. MEDICAL CONSENT FORM

In the event of an emergency, I authorize Heima Nest & Nook staff to seek medical treatment for my child and to transport them to a medical facility if needed. I understand that efforts will be made to contact me immediately.

Known Allergies or Health Concerns: _____
Child's Doctor: _____
Phone Number: _____

4. DROP-IN CHILDCARE AGREEMENT

I understand that drop-in childcare services are provided on an hourly basis. I agree to the following:

- Check-in and check-out must be completed by an authorized adult.
- Payment is due at time of drop off unless otherwise arranged.
- Children may not stay longer than the maximum daily limit (4 hours).

5. HEALTH & ILLNESS POLICY ACKNOWLEDGMENT

I agree **not** to bring my child to Heima Nest & Nook if they exhibit any of the following:

- Fever over 100.4°F
- Vomiting or diarrhea in the past 24 hours
- Contagious illness (e.g., pink eye, lice, COVID-19)

6. BEHAVIOR & DISCIPLINE POLICY AGREEMENT

I understand and support the use of positive reinforcement and redirection at Heima Nest & Nook. I acknowledge that physical or emotional punishment is never used, and I agree to support the staff's decisions regarding behavior management.

7. PHOTO/VIDEO RELEASE FORM

I DO give permission

I DO NOT give permission

for my child's photo or video to be used in Heima Nest & Nook's marketing materials, website, or social media.

8. PAYMENT POLICY AGREEMENT

I understand that:

- Rates are hourly
- Pick-up is expected by the agreed-upon time. A 10-minute grace period is allowed. After that, an additional hour of care will be charged.

11. PRIVACY POLICY ACKNOWLEDGMENT

I understand that Heima Nest & Nook respects the privacy of my family's information and will not share it without consent unless required by law.

12. PARENT LOUNGE POLICY

As required by NC Child Care Rule 10A NCAC 09 .2202(3), parents or custodians may not engage in work-related activities while their child is in drop-in care and while using the lounge area.

13. FOOD & ALLERGY POLICY ACKNOWLEDGMENT

I understand that I must inform staff of any dietary restrictions

14. VIDEO MONITORING POLICY

For the safety, security, and well-being of all children and staff, Heima Nest & Nook uses video cameras in all care areas. Recordings are used solely for internal review and liability protection. Footage is not live-streamed or shared, except if required by law.

15. SOCKS ONLY POLICY

For health and safety reasons, all children must wear socks while inside the childcare facility. No bare feet or shoes are allowed in play areas. Please pack an extra pair of socks for your child.

I have read and agree to all policies outlined in this document

Parent/Guardian Name: _____

Signature: _____

Date: _____

We are so glad you are here!