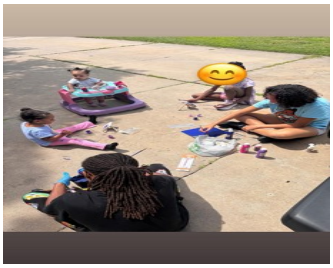
Little Dreamers Village

Complete Parent Enrollment Packet

2025-2026 School Year

Licensed Family Child Care Home
Ages 6 Weeks - 9 Years | DCF Accepted | Private Pay Welcome
Home-Cooked Meals | CPR/First Aid Certified | Nurse On Call
School Transportation for Enrolled Children



316-208-5268 | littledreamervillage@gmail.com

Packet Checklist

Please complete and return all required pages before your child begins care.

☐ Enrollment Application

☐ Emergency Contact Form

☐ Authorized Pickup List

☐ Medical and Allergy Information

☐ Tuition Agreement

☐ Attendance and Spot-Holding Agreement

☐ Transportation Agreement, if applicable

☐ CACFP Meal Program Information

☐ Permission Forms

☐ Emergency Medical Authorization

☐ Parent Handbook Acknowledgment

This packet is designed so each major form or signature agreement can stand on its own page for parent review and signatures.

Welcome to the Village

A message from Little Dreamers Village

Dear Parent/Guardian,

Welcome to Little Dreamers Village. Thank you for trusting us with your child. Our program was created to give families a safe, loving, dependable childcare home where children can learn, play, and grow in a family-oriented environment.

We believe children learn best through hands-on experiences, daily routines, creative play, positive guidance, and strong communication between families and provider. Our goal is for every child to feel safe, valued, and loved while building confidence and independence.

Please review this packet carefully. It explains enrollment requirements, tuition, attendance, transportation, meals, illness, emergency procedures, and parent responsibilities. Signed forms must be completed before care begins.

Parent/Guardian Acknowledgment: _____ Date: _____

Provider Signature: _____ Date: _____

About Our Program

Licensed Family Child Care Home

Mission

To provide dependable, nurturing childcare where children are safe, supported, and encouraged to learn through play.

Philosophy

Children thrive when they feel secure, loved, and understood. We use age-appropriate activities, consistent routines, and positive guidance to support each child.

What Makes Us Different

We provide meals, supplies, individualized care, family-style communication, and transportation support for enrolled school-age children.

Enrollment Application

Child and family information

Child Full Name: _____

Date of Birth: _____

Age: _____

Start Date: _____

Home Address: _____

City/State/Zip: _____

Primary Language: _____

School Name: _____

Grade: _____

Teacher: _____

Parent/Guardian Information

Parent/Guardian 1 Name:
_____

Relationship: _____

Phone: _____

Email: _____

Employer: _____

Work Phone: _____

Parent/Guardian 2 Name:
_____

Relationship: _____

Phone: _____

Email: _____

Employer: _____

Work Phone: _____

Parent/Guardian Signature:
_____

Date: _____

Provider Signature:
_____

Date: _____

Emergency Contact Form

Contacts must be reachable during care hours.

Emergency Contact #1

Name: _____

Relationship: _____

Phone: _____

Alternate Phone: _____

Address: _____

Allowed to Pick Up? Yes/No: _____

Emergency Contact #2

Name: _____

Relationship: _____

Phone: _____

Alternate Phone: _____

Address: _____

Allowed to Pick Up? Yes/No: _____

Emergency Contact #3

Name: _____

Relationship: _____

Phone: _____

Alternate Phone: _____

Address: _____

Allowed to Pick Up? Yes/No: _____

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Authorized Pick-Up List

Only listed adults may pick up unless written permission is provided.

1. Name / Relationship / Phone / ID Verified: _____

2. Name / Relationship / Phone / ID Verified: _____

3. Name / Relationship / Phone / ID Verified: _____

4. Name / Relationship / Phone / ID Verified: _____

5. Name / Relationship / Phone / ID Verified: _____

6. Name / Relationship / Phone / ID Verified: _____

A photo ID may be required before releasing a child. The provider may refuse release if the adult appears unsafe, impaired, or is not authorized.

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Medical Information and Allergy Form

Complete even if your child has no allergies.

Physician/Clinic: _____ Insurance Provider: _____

Physician Phone: _____ Policy Number: _____

Preferred Hospital: _____ Current Medications: _____

Allergies: _____

Food Restrictions: _____

Medical Conditions: _____

Special Instructions: _____

☐ My child has no known allergies.

☐ My child has allergies listed above.

☐ My child requires an emergency action plan.

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Tuition Agreement

Weekly tuition reserves your child's space.

Tuition at Little Dreamers Village is charged weekly. Payment reserves your child's enrollment space and is due whether your child attends or not. This allows the daycare to maintain staffing, meals, supplies, transportation planning, and the reserved childcare opening.

☐ I understand tuition is due weekly.

☐ I understand tuition reserves my child's spot, not attendance.

☐ I understand no credits or refunds are given for missed days.

☐ I understand late payments may result in late fees or suspension of care.

Weekly Tuition Amount: _____

Payment Method: _____

Payment Due Day: _____

Registration Fee Paid: _____

Parent/Guardian Signature: _____

Date: _____

Provider Signature: _____

Date: _____

Attendance and Spot-Holding Policy

Applies during school days, breaks, absences, and vacations.

Your child's spot is held for your family as long as tuition is current. Tuition remains the same for absences, illness, family vacations, school breaks, teacher workdays, snow days, early release days, and other days your child does not attend.

☐ I understand tuition is due regardless of attendance.

☐ I understand school breaks do not pause tuition.

☐ I understand family vacations do not pause tuition.

☐ I understand that failure to pay may cause my child's spot to be released.

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Transportation Agreement

For enrolled daycare children only

Transportation is available only for children enrolled at Little Dreamers Village. This is not a transportation-only service. Transportation may include school drop-off, school pickup, and return to daycare.

School Name: _____

Teacher: _____

School Address: _____

School Start Time: _____

School Phone: _____

School Dismissal Time: _____

Grade: _____

Transportation Start Date: _____

Transportation Requested

☐ Morning drop-off to school

☐ Afternoon pickup from school

☐ Both morning and afternoon transportation

☐ Early release pickup when available

☐ Full-day care during school breaks when tuition is current

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Vehicle Safety Agreement

Required for all transported children

☐ My child will use the required car seat, booster seat, or seat belt.

☐ My child must remain seated and buckled while the vehicle is moving.

☐ My child must use respectful behavior during transportation.

☐ I will notify the provider of transportation schedule changes as soon as possible.

☐ I understand unsafe behavior may result in loss of transportation privileges.

Child Height: _____

Car Seat/Booster Needed: _____

Child Weight: _____

Parent Provides Seat? Yes/No: _____

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

School Break Care Form

Winter break, spring break, teacher workdays, snow days, and summer break

Children enrolled in the school-age program may attend full days during scheduled school breaks when tuition is current and space is available within licensing capacity. Tuition remains the same whether the child attends or not.

☐ My child will attend during school breaks when care is needed.

☐ My child will not usually attend during school breaks.

☐ I understand tuition remains due either way.

Notes about school-break needs: _____

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

CACFP Meal Program Information

Meals and snacks are provided.

Little Dreamers Village provides meals and snacks. Families must report allergies, dietary restrictions, and milk substitutions before care begins. Special diet requests may require written documentation.

☐ My child may participate in meals provided by Little Dreamers Village.

☐ My child has food allergies listed in this packet.

☐ My child needs a milk substitution.

☐ My child has no food restrictions.

Child Name: _____

Date of Birth: _____

Milk Type/Restriction: _____

Special Diet Notes: _____

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Infant Feeding Information

For children under 12 months or as needed

Formula/Breast Milk: _____

Bottle Amount: _____

Bottle Times: _____

Baby Food Stage: _____

Foods Tried: _____

Foods to Avoid: _____

Parent Provides Items?:
_____

Special Instructions: _____

Parents must update feeding instructions as the child's needs change.

Parent/Guardian Signature:
_____

Date: _____

Provider Signature:
_____

Date: _____

Photo and Social Media Release

Permission form

I give permission for my child to be included in photos or videos used for daycare communication, memories, private parent updates, or approved social media posts.

☐ YES, my child may be photographed/videoed.
☐ NO, please do not photograph/video my child.

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Sunscreen Permission

Permission form

I give permission for sunscreen to be applied when outdoor play requires sun protection.

☐ Parent provides sunscreen.
☐ Provider may use daycare sunscreen.
☐ Do not apply sunscreen.

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Bug Spray Permission

Permission form

I give permission for bug spray to be applied when needed for outdoor play.

☐ Parent provides bug spray.
☐ Provider may use daycare bug spray.
☐ Do not apply bug spray.

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Water Play Permission

Permission form

I give permission for my child to participate in supervised water play activities.

☐ YES, my child may participate.
☐ NO, my child may not participate.

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Walking Trip Permission

Permission form

I give permission for supervised neighborhood walks or nearby outdoor activities.

☐ YES, my child may participate.
☐ NO, my child may not participate.

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Field Trip Permission

Permission form

I understand separate notice may be provided for planned field trips, and I give permission for my child to participate when I sign the trip notice.

☐ YES, with signed trip notice.
☐ NO field trips without additional written approval.

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Emergency Medical Authorization

Required before care begins.

In the event of an emergency, illness, or injury, I authorize Little Dreamers Village to seek emergency medical treatment for my child if I cannot be reached immediately.

Child Name: _____

Physician: _____

Date of Birth: _____

Insurance Provider: _____

Preferred Hospital: _____

Policy Number: _____

Parent/Guardian Signature: _____

Date: _____

Provider Signature: _____

Date: _____

Medication Authorization

Medication requires written permission.

Medication will not be given without written parent permission and proper labeling. Prescription medication must be in the original container with the child's name and instructions.

Medication Name: _____

End Date: _____

Dose: _____

Reason for Medication: _____

Time to Give: _____

Storage Instructions: _____

Start Date: _____

Possible Side Effects: _____

Parent/Guardian Signature: _____

Date: _____

Provider Signature: _____

Date: _____

Parent Handbook

Policies and procedures

The following pages explain Little Dreamers Village policies. Please read carefully and sign the acknowledgment page at the end.

Hours of Operation

Parent Handbook Policy

Hours may vary by enrollment needs and approved schedules. Parents will be informed of current operating hours and scheduled closures.

Parent Notes / Questions:

: _____

: _____

: _____

Enrollment and Trial Period

Parent Handbook Policy

Enrollment is not complete until all forms, required records, fees, and signed agreements are received. The provider may use an adjustment period to make sure the placement is a good fit.

Parent Notes / Questions:

: _____

: _____

: _____

Arrival and Departure

Parent Handbook Policy

Parents must sign children in and out daily. Children must be brought inside and released directly to the provider unless another procedure is approved.

Parent Notes / Questions:

: _____

: _____

: _____

Tuition and Payments

Parent Handbook Policy

Tuition is due as agreed in the tuition agreement. Payment reserves a childcare space and is not based on attendance. Late payments may result in late fees or suspension of care.

Parent Notes / Questions:

: _____

: _____

: _____

Late Pick-Up

Parent Handbook Policy

Children must be picked up by the agreed pickup time. Late fees may apply when a child is picked up late.

Parent Notes / Questions:

: _____

: _____

: _____

Absences and Vacations

Parent Handbook Policy

Parents should notify the provider when a child will be absent. Tuition remains due during absences and vacations.

Parent Notes / Questions:

: _____

: _____

: _____

School Closures and Breaks

Parent Handbook Policy

School-age children may attend during teacher workdays, snow days, early release days, and school breaks when care is available and tuition is current.

Parent Notes / Questions:

: _____

: _____

: _____

Transportation

Parent Handbook Policy

Transportation is only for enrolled children. Children must follow all vehicle safety rules. Parents must notify the provider of school schedule changes.

Parent Notes / Questions:

: _____

: _____

: _____

Meals and Snacks

Parent Handbook Policy

Meals and snacks are provided. Parents must notify the provider of allergies, dietary needs, and special feeding instructions.

Parent Notes / Questions:

: _____

: _____

: _____

Rest and Nap Time

Parent Handbook Policy

Children will be provided a safe, supervised rest period appropriate for their age and needs.

Parent Notes / Questions:

: _____

: _____

: _____

Safe Sleep

Parent Handbook Policy

Infants will be placed to sleep according to safe sleep practices. Parents must provide any required safe sleep documentation if applicable.

Parent Notes / Questions:

: _____

: _____

: _____

Behavior Guidance

Parent Handbook Policy

We use positive guidance, redirection, age-appropriate expectations, and consistent routines. Physical punishment is not used.

Parent Notes / Questions:

: _____

: _____

: _____

Illness Policy

Parent Handbook Policy

Children must stay home when they have symptoms that prevent participation or may expose others. Fever, vomiting, diarrhea, contagious illness, or unexplained rash may require exclusion.

Parent Notes / Questions:

: _____

: _____

: _____

Medication Policy

Parent Handbook Policy

Medication requires written authorization and proper labeling. The provider may refuse medication that is not properly documented.

Parent Notes / Questions:

: _____

: _____

: _____

Clothing and Supplies

Parent Handbook Policy

Children should have weather-appropriate clothing and backup clothes. Little Dreamers Village may provide many daily essentials, but parents remain responsible for requested items.

Parent Notes / Questions:

: _____

: _____

: _____

Outdoor Play

Parent Handbook Policy

Outdoor play is part of the daily routine when weather permits. Children should have appropriate clothing for outdoor conditions.

Parent Notes / Questions:

: _____

: _____

: _____

Weather and Emergency Closures

Parent Handbook Policy

The provider may close or adjust care for severe weather, unsafe conditions, utility failure, emergency illness, or licensing requirements.

Parent Notes / Questions:

: _____

: _____

: _____

Emergency Procedures

Parent Handbook Policy

Emergency plans include fire, tornado, lockdown, intruder, utility failure, and medical emergencies. Drills may be practiced as required.

Parent Notes / Questions:

: _____

: _____

: _____

Communication

Parent Handbook Policy

Parents are expected to keep phone numbers, emergency contacts, school schedules, and medical information current. Important updates should be shared promptly.

Parent Notes / Questions:

: _____

: _____

: _____

Confidentiality

Parent Handbook Policy

Family and child information is kept private and shared only as needed for care, safety, licensing, or legal requirements.

Parent Notes / Questions:

: _____

: _____

: _____

Termination of Care

Parent Handbook Policy

Care may be terminated for nonpayment, repeated late pickup, unsafe behavior, incomplete paperwork, policy violations, or if the provider determines the program cannot meet the child’s needs.

Parent Notes / Questions:

: _____

: _____

: _____

Daily Schedule

Sample routine; times may vary by group needs.

Infants

Arrival, bottles, diapering, tummy time, naps, sensory play, meals as age-appropriate, outdoor time when weather permits.

Toddlers

Arrival, breakfast, circle time, learning centers, outdoor play, lunch, rest time, PM snack, free play.

Preschool

Arrival, breakfast, calendar/circle time, literacy, math, art, outdoor play, lunch, rest, PM snack, centers.

School Age

Before school care, transportation to school, afternoon pickup, snack, homework/quiet time, enrichment activities, free play.

First Day Checklist

What to bring and what we provide

Please Bring

☐ Completed enrollment packet

☐ Immunization record

☐ Health assessment if required

☐ Change of clothes

☐ Comfort item if needed

☐ Any special medical or feeding instructions

Little Dreamers Village Provides

☐ Meals and snacks

☐ Milk as appropriate

☐ Daily learning activities

☐ Indoor and outdoor play

☐ Family communication

☐ Basic daily care supplies when available

Parent Resource Page

Keep this page for quick reference.

Little Dreamers Village
Licensed Family Child Care Home
Phone: 316-208-5268
Email: littledreamervillage@gmail.com

Provider Name: _____

Regular Drop-Off Time: _____

Regular Pick-Up Time: _____

School Transportation Notes: _____

Parent Handbook Acknowledgment

Signature required

I acknowledge that I have received, read, and agree to follow the Little Dreamers Village Parent Handbook and enrollment policies.

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____

Final Enrollment Agreement

All required forms must be complete before care begins.

☐ Enrollment Application Completed

☐ Tuition Agreement Signed

☐ Attendance and Spot-Holding Agreement Signed

☐ Transportation Agreement Signed, if applicable

☐ Emergency Medical Authorization Signed

☐ CACFP Meal Information Completed

☐ Permission Forms Completed

☐ Parent Handbook Acknowledgment Signed

Parent/Guardian Signature: _____ Date: _____

Provider Signature: _____ Date: _____