



# Rocking Horse Academy

## PRESCHOOL REGISTRATION FINANCIAL AGREEMENT

Received:

Entered in ProCare:

CHILD'S NAME \_\_\_\_\_ DOB \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_

REQUESTED START DATE \_\_\_\_\_ CLASSROOM \_\_\_\_\_ TUITION RATE \_\_\_\_\_

PARENT/GUARDIAN 1		PARENT/GUARDIAN 2	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY	STATE ZIP	CITY	STATE ZIP
EMAIL		EMAIL	
CELL		CELL	

<b>REGISTRATION FEE</b> (DUE UPON ENROLLMENT NON-REFUNDABLE.)	\$150 single child + \$50 per additional child	Paid <input type="checkbox"/>
<b>SECURITY DEPOSIT</b> (MUST BE PAID IN FULL)	\$300	Paid <input type="checkbox"/>
<b>SEMI-ANNUAL SUPPLY FEE</b> (DUE FIRST WEEK OF ENROLLMENT NON-REFUNDABLE)	\$100	Paid <input type="checkbox"/>

Wait-listed families must have their \$300 security deposit paid **30 days prior to enrollment**. Failure to do so may result in loss of reservation.

Deposit is subject to forfeiture if the student does not enroll within 30 days of the reservation date.

Families who have paid the deposit in full AND given us 30-days (4 tuition weeks) written notice of intent to withdraw may apply the deposit to their final 2 weeks of tuition owed.

If 30-days (4 tuition weeks) written notice is NOT given, the deposit is forfeited.

NSF fee of \$40.00 on ALL returned payments.

I have read and agree to the terms of this Financial Agreement. I understand that failure to pay by these terms will result in loss of enrollment for my child(ren). Tuition is charged every 2 weeks regardless of absences or illness. Failure to pay the account as owed can result in court judgments, negative credit reporting, and collections. (Rates are subject to change). By signing this document, I acknowledge I have read, understand, and agree to abide by the written policies set forth in the Family Handbook available at [www.rockinghorseacademy.com](http://www.rockinghorseacademy.com).

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_

Staff Signature \_\_\_\_\_ Date \_\_\_\_\_



# Rocking Horse Academy

## FINANCIAL EFT ENROLLMENT

Rocking Horse Academy accepts EZ-EFT banking service that makes it easy for you to pay your childcare fees automatically – at absolutely no additional cost to you. The simple authorization form allows us to bill your financial institution on the designated tuition due date. There is no need for you to write checks, remember to drop off (or mail) them, or worry about late fees. Your record of payment will be listed each month on your banking statement.

Only **one** account will be made for each child/family; we cannot split the account. Both parents/guardians are legally liable for the full payment of tuition. We cannot become involved in financial disputes between parents or guardians.

Getting started is easy. Simply complete the attached authorization form or pick one up at the front desk. Attach a voided check to the form or a letter from your bank you're your account information and return it to us. All authorization forms should be returned to the front desk **ONLY**; please do not give them to your child's teacher to be passed on to us.

EZ-EFT is safe, secure and easy. Sign up is required for processing tuition payments!  
Feel free to stop by, call or email if you have any questions!!

Thank you,  
Cody Bench  
Accounts Manager  
[accounts@rockinghorseacademy.com](mailto:accounts@rockinghorseacademy.com)

EZ-EFT Authorization Form

I hereby authorize my financial institution to make periodic payments on my behalf from the checking or savings account listed below and transfer it to **ROCKING HORSE ACADEMY**.

CHOOSE ONE:

- Checking Account Transfer
- Savings Account Transfer

*I understand that I am in full control of my payments, and I will notify RHA at least one week in advance if at any time I decide to make any changes, discontinue this service, or change or close my bank account.*

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**\*VOIDED CHECK MUST BE ATTACHED\***



# Rocking Horse Academy

## PRESCHOOL ENROLLMENT

CHILD'S NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ GENDER \_\_\_\_\_

PARENT/GUARDIAN 1			PARENT/GUARDIAN 2		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP	CITY	STATE	ZIP
EMAIL			EMAIL		
CELL	HM PHONE		CELL	HM PHONE	
EMPLOYER	WK PHONE		EMPLOYER	WK PHONE	

AUTHORIZED TO PICK UP OTHER THAN PARENT/GUARDIAN											
NAME			RELATION			NAME			RELATION		
CELL			ALT NUMBER			CELL			ALT NUMBER		
NAME			RELATION			NAME			RELATION		
CELL			ALT NUMBER			CELL			ALT NUMBER		

**IF YOU CHOOSE TO NOT INCLUDE AN AUTHORIZED PICKUP PERSON, PLEASE INITIAL THE STATEMENT BELOW:**

I, \_\_\_\_\_ (parent/guardian) choose to not list an authorized pickup for \_\_\_\_\_ (child's name).

Parent Initials:

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



# Rocking Horse Academy

## TUITION DISCOUNT APPLICATION

CHILD'S NAME \_\_\_\_\_ CLASSROOM \_\_\_\_\_

CHILD'S NAME \_\_\_\_\_ CLASSROOM \_\_\_\_\_

PARENT/GUARDIANS NAME \_\_\_\_\_ DATE \_\_\_\_\_

DISCOUNT QUALIFICATION (check which applies*)	
<input type="checkbox"/> Educator	<input type="checkbox"/> Sibling
<input type="checkbox"/> First Responder	<input type="checkbox"/> RHA Employee
<input type="checkbox"/> Military	
*Only one discount may apply. Discounts may not be combined.	

This section to be completed by: Servicemembers, First Responders, Educators	
EMPLOYER INFORMATION/DOCUMENTATION	
<b>PLEASE ATTACH A PHOTOCOPY OF YOUR ID SHOWING THE PLACE OF EMPLOYMENT.</b> ex: faculty ID card, military ID, badge etc.	
PLACE OF EMPLOYMENT	POSITION
SUPERVISOR NAME	PHONE NUMBER
SUPERVISOR SIGNATURE	DATE
Signature of Supervisor/ Ranking Officer required to verify employment in stated service.	

Tuition Discount applies to tuition only; it does not include any other fees/charges.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator Signature

\_\_\_\_\_  
Date Applied



# Rocking Horse Academy

## PRESCHOOL MEDICAL FORM

CHILD'S NAME \_\_\_\_\_

### MEDICAL INFORMATION

DOCTOR:	PH:
PREFERRED HOSPITAL:	PH:
ADDRESS:	CITY:
INSURANCE CO:	POLICY #:
GROUP #:	EXP. DATE:

### ALLERGIES/MEDICAL CONDITIONS

DRUG ALLERGIES:	FOOD ALLERGIES:
INSECT ALLERGIES:	CHRONIC CONDITIONS:
SPECIAL NEEDS:	PRESCRIBED MEDICATIONS:
Serious medical conditions/surgeries w/in the last 12 months:	
If you have stated any allergies and/or medical conditions mentioned above, further medical documentation will be required.	

### STANDING ORDER FOR THE APPLICATION OF PARENT-PROVIDED NON-PRESCRIPTION, TOPICAL MEDICATION, CREAMS, LOTIONS.

TEETHING: (Anbesol, Orajel, other)	OINTMENT: (Bacitracin, Neosporin, Zinc Oxide, other)
DIAPER CREAM: (Dr. Smith's, A&D, Desitin, other)	SUNSCREEN (NON-AEROSOL OR PUMP LOTION ONLY): (Coppertone, Johnsons, other)
*If directions of OTC medications suggest a doctor's note for age of child, doctor's note will be required.	
<input type="checkbox"/> Check box to authorize use of sunscreen provided by RHA. (See admin for current brand/ingredient list.)	

### MEDICAL EMERGENCY AUTHORIZATION

In the event that my child should become ill or sustain an injury while in the care of Rocking Horse Academy, I/we give permission to the person(s) in charge to take whatever steps are necessary to obtain the required medical treatment for my child.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



# Rocking Horse Academy

## EMERGENCY PLAN & TRANSPORTATION

### PARENT LETTER

To Parent(s)/Guardian(s):

This letter is to communicate with all our enrolled families our commitment and plan for the safety and welfare of your child(ren) while attending Rocking Horse Academy.

Our Emergency Plan provides for a response to all types of emergencies. In the event of an emergency situation that requires an evacuation of our school’s facility, our staff will make every attempt to contact you in such an event. Please be sure to supply us with up-to-date emergency contact information including your email and an out-of-area contact, if possible.

Depending on the circumstance of the emergency, we will use one of the following protective actions:

- **On-Site Evacuation:** Students are evacuated to a safe area on the grounds of the facility in the event of a fire, etc.
- **Sheltering In-Place or Lock-down:** Sudden occurrences in weather or other hazardous situations may dictate taking cover inside the building.
- **Off-Site Evacuation:** Total evacuation of the facility may become necessary if there is a danger in the area. In this case, children will be taken to a relocation facility by Rocking Horse Academy’s program vehicles, staff vehicles, parent vehicles, volunteers or neighbors and/or walking. Staff will remain with and care for your child(ren) at all times during an event. Attendance will be checked regularly whenever our children are moved. Staff will bring any necessary medications, supplies, and emergency records. In the event that we receive different instructions from emergency personnel, every attempt will be made to contact you with the alternate plan or post messages on Facebook and Twitter if possible.

EMERGENCY RELOCATION FACILITIES	
<p><b>FACILITY A</b> (Primary option near school) Plum Creek Golf Course Pavilion 750 Kohler’s Crossing Kyle, TX 78640 512-262-5555 - Site Contact: Marc Farris - Club Manager</p>	<p><b>FACILITY B</b> (Secondary option near school) Saint Anthony Catholic Church 801 N. Burleson Road Kyle, TX 78640 512-268-6966 - Site Contact: Father Juan Carlos Lopez</p>

*Students will remain at the relocation facility accompanied by our teachers and staff while family/guardian/ emergency contacts are notified of the situation. If you’re not sure how to get to any of these locations, please ask for directions BEFORE there’s an emergency.*

Modified Operation: Cancellation/postponement or rescheduling of normal business operations may be required. These actions are normally taken in case of a winter storm or building/transportation problems (such as utility disruptions or mechanical difficulties) that may make it unsafe for children in a variety of situations.

Please listen to local radio/television stations for announcements relating to any of the emergency actions listed above. If it ever becomes necessary to relocate, a sign will be posted on the main entrance stating which facility we've gone to (A or B). We will attempt to leave a message on the school's main number 512- 405-3700. If possible, we will also post announcements on Facebook and/or Twitter. We do ask that you limit your calls during an emergency. This will keep the main telephone line free to make emergency calls and relay information.

Just in case these options are not available, you may try to contact us at:

512-578-9673 (Emergency Cell Number)

**This is for EMERGENCY USE ONLY.**

Our Emergency Plan relies directly on your contributions of extra clothing, medication, diapering supplies, water supply donations, and your preparation for an emergency situation. Please take the time to implement your own Family Plan. Please keep this information with you so that you will know how to contact and find us in the event of an emergency or evacuation.

**An "Emergency Contact Card" is in each classroom or at the front desk for you to complete. This form will be used to contact families and verify authorized emergency contacts in order to release your child. Please ensure that only those persons you list on the form attempt to pick up your child.**

**In order to guarantee we have all of our student's most up-to-date emergency information, our school will require that all children's "Emergency Contact Card" be resubmitted at the beginning of each school year regardless of your last update.**

We realize that emergency circumstances may require changes to your plans, but I urge you to NOT make different arrangements if at all possible. This will only create additional confusion and divert staff from their assigned emergency duties.

In order to assure the safety of your children and our staff, I ask for your understanding and cooperation. Should you have additional questions regarding our emergency operating procedures, contact me at 512-405-3700 ext 305.

Sincerely,

*Rebecca Eichen*

Director



# Rocking Horse Academy

## EMERGENCY PLAN & TRANSPORTATION PARENT CONSENT

To the Parent(s)/Guardian of, \_\_\_\_\_  
(print child's name)

By signing this form, I acknowledge that I have read and understand Rocking Horse Academy's *Emergency Plan & Transportation Parent Letter* and I give permission for my child to be transported in the event of an emergency.

\_\_\_\_\_  
PARENT/GUARDIAN NAME (PLEASE PRINT)

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

**PLEASE PROVIDE US WITH 1 OR MORE EMERGENCY CONTACTS OTHER THAN PARENT OR GUARDIAN. ADDRESSES MUST BE INCLUDED.**

EMERGENCY CONTACT 1		EMERGENCY CONTACT 2	
NAME	RELATIONSHIP	NAME	RELATIONSHIP
ADDRESS	CELL	ADDRESS	CELL

**IF YOU CHOOSE NOT TO PROVIDE AN EMERGENCY CONTACT, PLEASE SIGN BELOW:**

I, \_\_\_\_\_ (parent/guardian), choose to not list an emergency contact for  
\_\_\_\_\_ (child).

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

**PLEASE RETURN TO US AS SOON AS POSSIBLE OR BY YOUR FIRST DAY OF ENROLLMENT.**

**Families will be asked to review and sign this form annually at Back-to-School Night.**





# Rocking Horse Academy

## CHILD INFORMATION SHEET

This is confidential information for the Director, Assistant Director, and Teacher's use only for the sole purpose of understanding and developing your child's physical, emotional, and educational needs. This form is voluntary and only used to give us guidance.

1. Child's Name \_\_\_\_\_ Gender \_\_\_\_\_

2. Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Married/Partners    Divorced    Separated    Single Parent    Mother Custody

Father Custody    Legal Guardian    Adopted

Legal Document (Please specify type) \_\_\_\_\_

3. Date of Birth \_\_\_\_\_

4. My child likes to:

5. My child is happiest when:

6. My child may become frustrated when:

7. My child will express his/her anger by:

8. When dealing with change, my child:(circle long or short)

Isn't bothered by it very long.

Takes a (long----short) time to adjust to new children.

Gets excited when meeting different people.

Takes a (long --- short) time to adjust to new places.

Takes a (long----short) time to adjust to new adults.

Takes a (long --- short) time to adjust to new things.

9. When faced with separation from his/her parents, my child:

10. My child may need help with:

11. I also want you to know:

12. Eating habits:

13. Napping habits:

14. Who usually disciplines your child:    Mother

Father

Other: \_\_\_\_\_

Usual form of discipline:

(Check all that apply.)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



# Rocking Horse Academy

## PRESCHOOL ACKNOWLEDGMENTS/PERMISSIONS

CHILD'S NAME \_\_\_\_\_

INITIALS ARE REQUIRED FOR EACH STATEMENT.

**Family Handbook (available at [www.rockinghorseacademy.com](http://www.rockinghorseacademy.com)):** I have read, understand, and agree to abide by the written policies set forth in the Family Handbook. I understand these policies may change; however, every attempt will be made to inform parents of those changes. I am responsible for reading memos, updates, & newsletters that may inform me of those changes.

**Immunizations:** As per our policy, Rocking Horse Academy requires a current copy of immunization records. It is the parent's responsibility to provide updated shot records. Failure to do so may result in an interruption of services. **Hearing/Vision Screening:** I understand all children four years of age and older must be screened for vision and hearing difficulties. I agree to provide the center with the results of that test within 30 days of my child's 4th birthday.

**Therapists/Observers/Volunteers:** I am aware that Rocking Horse Academy cooperates with Texas State University, Hays CISD, ECI, and other professional institutions by allowing the students and personnel to observe our students and teachers. These individuals will be subject to Tx HHS standards.

**Transportation:** I hereby give my consent for my child to be transported and supervised by facility's staff on field trips or in cases of emergency.

**Field Trips:** I hereby give my consent for my child to participate in field trips under the supervision of a staff member or parent volunteer. (Individual permission slips and 48 hours' notice or more will be given.)

**Water Activities:** I hereby give my consent for my child to participate in age-appropriate water activities. Individual notice will be posted.

**Photographs:** I hereby give my consent for Rocking Horse Academy to use photographs (individual or group-still or video) of my son/daughter for in-school displays, graduation slideshows and art projects. We respectfully request that families taking photographs during school or school functions that include children other than their own please refrain from posting the photos on social media sites unless prior permission has been given by the other child(ren)'s parent/guardian.

**Withdrawal:** I acknowledge that Rocking Horse Academy requires 30-days written notice (4 tuition weeks) to withdraw from school. If a 30-day written notice is NOT given, I will forfeit the security deposit.

**Accounts:** All accounts must be set up for EFT Bank Draft. Accounts cannot be divided.

**Food & Beverage Policy:** I have read, understand, and agree to abide by the RHA's "Healthful Food & Beverage Policy" provided in the Enrollment Packet and available on our website [www.rockinghorseacademy.com](http://www.rockinghorseacademy.com)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Revised 07/2024



# Rocking Horse Academy

## PRESCHOOL FAMILY HANDBOOK SUMMARY

This is a summary of policies discussed in our handbook. Parents/guardians are encouraged to read the entire handbook to understand all our policies, and when you sign the Family Handbook declaration, you are stating that you have read the handbook and agree with our policies as stated. (A copy is available at [www.rockinghorseacademy.com](http://www.rockinghorseacademy.com))

### **RULES OR POLICIES ARE SUBJECT TO CHANGE**

The rules and regulations contained within are not exclusive. Other rules and regulations may be posted in and about the facility and shall be binding as described within this handbook in full. The Academy may from time to time choose to adopt and make amendments to its rules and regulations. All enrolled participants will be obligated to observe these policies. (Tuition rates are subject to change.)

### **HOURS OF OPERATION: 6:30 a.m. – 6:30 p.m.**

- **No drop off between 10:00 a.m. - 2:30 p.m.** The front door access code will be turned off during this time.
- Late drop-off exceptions will be made for a doctor's appointment with a note from the Dr.'s office
- Late pick-up 6:35 p.m. charged \$20 + \$1/minute
- Excessive late pick-ups (after 2 incidents within 30-day period) will be charged \$20 + \$2/minute

### **TUITION**

- As a service, invoices are emailed on Friday prior to tuition Monday (barring technical difficulties.) Be sure to notify us of any errors or change in email addresses.
- Charged and due every other Monday (no exceptions)
- Must be paid in full without deductions for absences, holidays, or vacations
- All families must sign up for EFT draft – no exceptions.
- Only ONE account will be made for each child/family. We cannot split invoices or accounts. Both parents/guardians are legally liable for the full payment of tuition. We cannot become involved in financial disputes between parents or guardians.
- EFT Drafts will be processed on the Tuesday following the Monday that tuition is due.
- NSF fees apply if a draft is declined.
- Tuition and NSF fees must be paid the next business day following bank notification to return to school.

### **DROP-OFF/PICK-UP**

- An adult **MUST** accompany the child to the classroom.
- An adult **MUST** pick up the child from the teacher. Siblings may only pick up or drop off if they have a driver's license.
- An adult **MUST** sign the child in/out of the classroom using their provided PIN or scan the QR code. (If your child is on the playground, you may **NOT** stand on the back porch and call your child to leave without going to the teacher and letting them know you are there.)
- If you arrange for someone else to pick up your child, please notify us. That person must check-in at the front desk and show a photo ID. Your child's file will be checked.
- No food after 7:15 a.m. All food removed at 7:30 a.m.

### **CLOTHING/ITEMS FROM HOME**

- Children get dirty or have accidents. Please don't send them in "nice" clothes.
- Please provide one extra set of clothes in case of an accident.
- Children must wear close-toed shoes for their safety. (No sandals, flip-flops, Crocs)
- Please LABEL all articles of clothing (especially sweaters, jackets, sweatshirts) with child's first name and last initial.
- Please LABEL all bedding, lunch bags, water cups, baby bottles, etc. with child's first name and last initial.
- Toys/personal items may **NOT** be brought to class unless requested by the teacher for Show and Share.
- Bedding should be brought in the beginning of the week and taken home at the end of the week for laundry.
- Bedding should be a crib-sized sheet, travel sized small blanket, and small pillow. Larger, bulkier bedding is not allowed.
- Home lunches should be nutritious (no candy, no juice). Refer to the Family Handbook regarding our food and beverage policy.
- Fresh water in a labeled water bottle must be provided every day. Only water can be in that bottle.

**ROCKING HORSE ACADEMY WILL NOT BE RESPONSIBLE FOR LOST ITEMS**

## ENROLLMENT/WITHDRAWAL

- Parents/guardians may NOT change a child's enrollment status without permission from the Assistant Director. (From full-time to part-time or vice versa or from MWF to TTH)
- Withdrawal requires 30 days' written notice (4 tuition weeks) to have the deposit applied to your balance. Weekly tuition will not be prorated for partial weeks.

## HOLIDAYS AND CLOSURES

New Year's Day	January 1 <sup>st</sup>	
Martin Luther King Jr. Day	3 <sup>rd</sup> Monday in January	Teacher In-service Day
President's Day	3 <sup>rd</sup> Monday in February	Teacher In-service Day
Good Friday	Friday before Easter	
Spring Training	Monday after Easter	Teacher In-service Day
Memorial Day	Last Monday in May	
Independence Day	July 4 <sup>th</sup>	
August Training	2 <sup>nd</sup> Friday in August	Teacher In-service Day
Labor Day	1 <sup>st</sup> Monday in September	
Columbus Day	2 <sup>nd</sup> Monday in October	Teacher In-service Day
Thanksgiving Day + Wednesday before & Friday after	4 <sup>th</sup> Wednesday, Thursday and Friday in November	
Christmas Day + 2-days TBA	December 25 <sup>th</sup>	

- ❖ The Academy will be closed the previous Friday or the following Monday, if a holiday falls on a Saturday or Sunday
- ❖ We will close an additional 2 days during the winter break. Dates will be posted and specified depending on the day Christmas and New Year's Day fall.

## ILLNESS

We post contagious illnesses on our classroom doors and notify TX HHS when applicable.

**Parents/guardians must pick up or arrange to have their child picked up within 90 minutes of attempted notification. Failure to comply will result in an additional fee of \$1.00 per minute after the 90 minutes.**

1. Fever axillary/forehead – greater than 100 degrees
2. Rash – unexplained
3. Diarrhea – multiple
4. Vomiting – multiple
5. Eye infection or Pinkeye – constant discharge
6. Lice and/or Nits. (We have a NO NIT policy)
7. Unable to participate in classroom activities.

If your child becomes ill at night, please notify the front desk the next day that you will not be attending school. Check our handbook for specific guidelines on our notification process when you can return to school. Generally, the child must be symptom-free, without medication, for 24 hours before returning or submit a doctor's note clearing the child to return to school. Whereas we take every precaution to prevent the spread of contagious diseases, Rocking Horse Academy is not liable if your child(ren) contracts any contagious disease while attending our school.

## MEDICATION

- All medication must be in its original container with the Rx number
- Medication will be administered according to the manufactured label, doctor's note, or prescribed instructions.
- Must be checked in at the front desk and logged into the Medication Logbook
- Must be accompanied by a doctor's note/current prescription
- Will be administered at 11 a.m. and 3 p.m. We do not administer antibiotics twice a day. The first dose should be given before school.

**By signing this document, I am certifying that I have read the FULL Family Handbook and agree to comply with all of its policies and procedures. I understand that this is a brief summary of some of the policies and procedures stated in the Family Handbook and does not cover all policies in effect.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



# Rocking Horse Academy

## DISCIPLINE AND GUIDANCE POLICY

CHILD'S NAME \_\_\_\_\_

Discipline must be:

- Individualized and consistent for each child;
- Appropriate to the child's level of understanding; and
- Directed toward teaching the child acceptable behavior and self-control.

A caregiver may only use positive methods of discipline and guidance that encourage self-esteem, self-control, and self-direction, which include at least the following:

- Using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
- Reminding a child of behavior expectations daily by using clear, positive statements;
- Redirecting behavior using positive statements; and
- Using brief supervised separation or time out from the group, when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age.

There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited:

- Corporal punishment or threats of corporal punishment;
- Punishment associated with food, naps, or toilet training;
- Pinching, shaking, or biting a child;
- Hitting a child with a hand or instrument;
- Putting anything in or on a child's mouth;
- Humiliating, ridiculing, rejecting, or yelling at a child;
- Subjecting a child to harsh, abusive, or profane language;
- Placing a child in a locked or dark room, bathroom, or closet with the door closed; and
- Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age.

Texas Administrative Code, Title 40, Chapters 746 and 747, Subchapters L, Discipline and Guidance

**My signature verifies I have read and received a copy of this discipline and guidance policy.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



# Rocking Horse Academy

## BEHAVIOR CONTRACT

We strive to provide each student enrolled in Rocking Horse Academy with a fun and safe learning environment. To ensure this, RHA provides an environment that promotes the social and academic skills necessary for successful development and eventual transition into a kindergarten classroom. The Academy has a variety of behavior systems in place. These include, but are not limited to, positive reward systems as well as personal behavior modification sheets based on the behavior notes that are filled out and communicated with parents/guardians.

Everyone has the right to a safe and positive environment, so together as families, students, and teachers we worked to outline rules, appropriate behavior, and consequences of inappropriate behavior at Rocking Horse Academy.

### **As a parent/guardian, I will:**

- Show respect and support for my child, the teachers, and the Academy.
- Support the Academy's and teacher's discipline policy.
- Attend parent-teacher conferences.
- Talk with my child each day about his/her choices.
- Follow the guidance and expectation, of a Behavior Action Plan, if implemented.

### **As a student, I will:**

- Always try to do my best.
- Be kind and helpful to my classmates and teachers.
- Show respect for myself, my school, and other people.
- Obey classroom, school, and bus rules.
- Show respect for property.
- Talk with my family each day about my school activities.
- Do my best to follow a Behavior Improvement Plan, if implemented.

### **As a teacher, I will:**

- Show respect for each child and his/her family.
- Provide a safe, comfortable environment that's conducive to learning.
- Help each child grow to his/her fullest potential.
- Enforce school and classroom rules fairly and consistently.
- Supply students and parents/guardians with clear evaluations of progress and achievement.
- Use special activities in the classroom to make learning enjoyable.
- Demonstrate professional behavior and a positive attitude.

## Discipline Process

1. A conversation is had between staff and child/children involved.
2. "Time away" is given depending on the behavior or broken rule.
3. A behavior note is sent home if behavior is not corrected after steps 1 and 2 are taken.
4. A parent is notified by phone if behavior continues after behavior note is sent home.
5. If necessary, a Behavior Action Plan will be implemented.

## Behavior Note System

Our behavior sheets are our first formal step in the behavioral redirection process. There are two separate types of "behavior notes" a child may receive. The RED behavior note is for physical issues (including but not limited to...kicking, hitting, pinching, throwing objects) and the YELLOW behavior notes are for behavior issues (including but not limited to...ongoing language issues, constant disrespect of RHA property, disrespect towards teachers and staff.) Students are aware when a behavior note is given by a teacher; the teacher will communicate with parent/guardian at pick up for each behavior note their child was given. To ensure proper communication, teachers will ask parent/guardian to sign accordingly. We want to ensure that students are set up for success while also holding them accountable for their words and actions and choices. If a student receives five or more behavior notes in one week, a Behavior Action Plan may be implemented, or they may be dismissed from our program. \*

\*Rocking Horse Academy has the right to meet with the parent/guardian and discuss immediate termination if physical or behavioral issues are causing a threat to the safety of the staff or the students in the program.

Please note, if a student requires one-on-one attention, due to their behavior, from staff/administration for any prolonged, sustained situation, families will be asked to pick-up their student for the remainder of the day. No adjustments will be made to tuition.

By signing this contract, you are agreeing to Rocking Horse Academy's academic and behavior standards and to act as an important partner in helping your child understand that only appropriate behavior that is non-threatening or bullying is appropriate in our school.

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

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



# Rocking Horse Academy

## HEALTHFUL FOOD & BEVERAGE POLICY

Rocking Horse Academy strives to promote health and wellness for the children in our program. We are committed to good nutrition as an integral part of the early childhood experience. Not only do children benefit physically, but they are also learning the importance of good nutrition. Our snack menus adhere to the minimum daily requirement standards, and we have limited sweets and sweetened foods on our menus. All meals meet the USFDA Nutritional Guidelines. They are carefully planned to appeal to the tastes of young children, so they eat more. As mentors and role models for children and families, we work hard at maintaining a healthful image at work and providing healthful opportunities and choices to our community and clients.

Therefore, RHA provides water and milk for all of its students, regardless of if they bring lunch from home or purchase a school lunch. (We may offer 100% juice in limited quantities to satisfy nutritional guidelines.)

In accordance with TX HHS Minimum Standards, water will always be provided throughout the day as well as for all snacks and meals. **A labeled water bottle or sip cup must be brought in daily, filled with water only (no juice or milk). Please take them home each day and return the following day with a clean water bottle.** Bottles will be refilled with tap water unless parents provide an alternative drinking supply. (i.e. bottled jugs of water)

**\*Our school will no longer serve beverages sent in children's lunch boxes from home.**

“Why has RHA chosen to not allow juice or fruit punch from home? “  
Numerous health care professionals and The American Academy of Pediatrics and state regulation have the following recommendation about juice. “Children under 6 years old should not drink more than 4-6 ounces of juice per day.” “You must not serve beverages with added sugars...” Our goal is to help promote more consumption of water to ensure our children are properly hydrated. **Also having a consistent beverage policy for all of our children will cut down on the confusion of why some children get “different” drinks while others are expected to drink milk or water.**

The only exception is parents providing beverages for a birthday or for a holiday/celebration day or field trips.

If your child has dietary restrictions or allergies, we must have written notification in your child's file. We will require a doctor's statement documenting the allergy and procedures we would follow should a child have a reaction while at school. RHA will not provide for these restrictions or allergies; therefore, families will need to provide alternate food options for snacks and lunch daily.

Also, students will not be served any candy while here at school, and it will be returned in their lunch boxes.

Foods served should encourage healthful eating and should include fresh fruits, vegetables, whole grains or other healthful options.

We appreciate your understanding and support in this matter.





# Rocking Horse Academy

## WELL-CHECK STATEMENT (PHYSICIAN)

Date \_\_\_\_\_

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

I have examined the above-named child within the past year and find that the child is physically able to take part in the child-care program.

\_\_\_\_\_  
Physician's Name

\_\_\_\_\_  
Physician's Signature

### §746.611

#### Must I have a health statement for children in my care?

*Subchapter C, Record Keeping Division 1, Records of Children  
09/01/03*

(a) A health statement is:

- (1) A written statement, from a health-care professional who has examined the child within the past year, indicating the child is physically able to take part in the child-care program.

*Health status information is critical to ensuring that the individual needs of children are met, while protecting the health and safety of all children in care*

*Texas Department of Family and Protective Services 15*

**Parents: Please attach a current copy of your child's immunization record.**