

Emergency and Medical Information



Teacher / Grade Level _____

Child's First Name _____ Middle Name _____ Last Name _____ Date of Birth _____

Child's Home Address _____ City/State/Zip _____ Home phone _____

Parent 1: Name _____ Parent 2: Name _____

Cell Phone _____ Work Number _____ Cell Phone _____ Work Number _____

Employer _____ Employer _____

EMERGENCY CONTACTS (in case parent(s) / guardian(s) cannot be reached):

Name _____ Relationship _____ Phone Numbers _____

Name _____ Relationship _____ Phone Numbers _____

Child's Doctor _____ Practice Name _____ Phone Number _____

Child's Dentist _____ Practice Name _____ Phone Number _____

Health Insurance Company _____ POLICY NUMBERS _____

Dental Insurance Company _____ POLICY NUMBERS _____

Any special medical conditions of which the school should be aware? (Allergies, diabetes, asthma, etc.) If yes, please describe how an episode/emergency should be treated (Epipen, insulin, inhaler, etc.) attaching detailed instructions if needed. Please also list reactions, rashes, or other minor concerns.

Does your child take any medications/supplements/vitamins/herbal remedies regularly? If so, please list name, dose, and frequency.

Dismissal Authorization

You may designate below those friends or relatives who have your permission to pick up your child from school on a standing basis. We cannot release your child to anyone for whom we do not have your written authorization, so please keep this form up to date by informing the office of any changes during the year. When your child will go home with someone not on this list, or with a friend from school, please give your child's teacher WRITTEN instructions that morning.

My child always has permission to ride with:

Name _____ Phone Number _____

Name _____ Phone Number _____

Name _____ Phone Number _____

Name _____ Phone Number _____

In the event I cannot be reached at the time of illness or accident to make arrangements for **emergency medical care**, I hereby authorize Montessori Children's House of Durham and Little House After School to get my child to the nearest doctor or hospital and to obtain the necessary medical assistance. I have provided necessary contact information, description of allergies, medications taken by my child and adults allowed to pick up my child from MCHD or LHAS.

Signature of Parent/Guardian _____ Date _____

Print Name of Parent/Guardian _____

Additional Information on the back or attached to form

Discipline and Behavior Management

At MCHD, we give children both freedom and responsibility. The Montessori environment is a rich and interesting place where children have the freedom to make choices, decisions, observations, and discoveries. They do their own work. They concentrate and create. They also interact with one another, cooperate, and share work, ideas, and excitement. At all times they are expected to demonstrate care and respect, and grace and courtesy.

The procedures and ground rules in the classroom are structured to foster the growth of self-direction as well as self-discipline. The focus is not on the adult's power to control the child, but rather on the development of each child's power and will to make decisions, which brings success to him/herself and good to the community as well.

Specific expectations grow from the Montessori philosophy of respect:

- Respect for the materials, the room, and ultimately the world we share
- Every person's respect for each person in the community
- The respect of each person for him/herself

Our classroom management presumes that behavior will be followed by natural and logical consequence (see *Children: The Challenge* by Rudolph Dreikurs). If a child behaves inappropriately we do one or more of the following:

- Remind the child of the ground rules, using positive language.
- Separate the child from the situation in one or more ways:
 - Ask the child to put away work that is being mishandled.
 - Ask the child to move to a different location (to a different table or away from the group she was working with, or to a different area of the playground).
 - Ask the child to come and stay by the teacher (to watch someone else's lesson, perhaps).
- For chronic and/or more difficult behavior, we may have the child stay in a particular spot (at a table or in a chair). This is usually a spot where the child has full view and hearing of classroom or playground activity. The child is asked to stay there until he decides that he is ready to behave appropriately, or until the teacher can see he is ready to rejoin the activities.
- Occasionally, if the child's behavior is very disruptive to other children and/or the teacher, the older child may be allowed to gain control of herself and/or do work in the school office. The teacher will accompany the child to the office and leave her, returning to verify that she is ready to rejoin the class or playground and behave appropriately.

In all discipline situations we assume that the child is basically good. We use positive rather than negative language. We make it clear that our affection and respect for the child remains constant.

A copy of this Discipline and Behavior Management Policy can be found in the MCHD Family Handbook.

Topical Ointment Permission

I do do not give permission for staff to use discretion in applying topical ointment to my child. I understand that these ointments may include antibiotic creams, and Traumeel, a popular cream used to reduce swelling from bumps and bruises.

I do do not give permission for staff to use discretion in applying bug repellent and/or sunscreen as needed.

Field Trip Permission

(Extended Day & Elementary Only)

I do do not give permission for my child to go on any field trip in which the Montessori Children's House of Durham participates. I understand that I will be notified in advance regarding the date, time, and destination of each field trip. All students under 8 years old or under 80 lbs. will be required to use a booster seat or car seat (provided by the parents) for all field trips. The office will approve all parent drivers in advance or may use a livery service.

Permission to Use Photograph

I do do not authorize MCHD to use a photograph or other image of my child or his or her work for use in advertising the school.

I have read and understand MCHD/LHAS's Discipline and Behavior Management Policy and I have given my permission for Topical Ointment, Field Trips, and Photography respectively.

Signature of Parent/Guardian

Date

Print Parent Name

Print Child's Name

Community Directory

Each year MCHD produces a Community Directory listing contact and other information for all of our students and their families.

All information listed in the directory is optional and the directory is not distributed beyond the MCHD community. You will be emailed a draft of your listing for final proofreading before it is distributed. Please fill in the information you would like to have listed.

Parent 1: Name

Address

Phone

Email address

Occupation

Employer

Hobbies/Interests

Parent 2: Name

Address (if different)

Phone

Email address

Occupation

Employer

Hobbies/Interests

Siblings:

Name	Age	Current or former MCHD student?
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_____ Name	_____ Age	_____ Current or former MCHD student?
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Friday Bulletin

MCHD publishes a weekly newsletter called the *Friday Bulletin*. Inside, families can find information about upcoming events, classroom activities, artwork, and pictures from the activities of the week. It is your main link to our school community. A paper copy can be sent home with your child each Friday or you can be emailed a web link weekly to read it online. The paper copy is printed in black and white, and the online version is in beautiful, full-color, PDF format.

Please choose which way you would like to receive the Friday Bulletin:

I would like to receive a paper copy of the Friday Bulletin.

I would like to read the Friday Bulletin online.

Grandparents and Special Friends

Each year, MCHD hosts Grandparents and Special Friends Day. Children host their special guests in their classroom for a portion of the morning. MCHD sends invitations directly to your child's grandparent (or aunt or godfather or another special friend.) Please provide us with the names of the guests you would like to invite.

1. Name(s)

Address

2. Name(s)

Address

Some grandparents like to receive the Friday Bulletin by email. Please provide an email address if your child's grandparent is interested. They may subscribe or unsubscribe at any time by emailing ashlin@mchdurham.org.

Email address _____

Email address _____

Email address _____

Community Directory Advertising

We offer free advertising for businesses owned by members of our community. If you would like to submit an ad (up to 1/4 page) or business card, please mail it to MCHD or email the electronic ad to ashlin@mchdurham.org.

Yes! I would like to submit an ad.