

Children's Waiting Room Policies and Parent/Guardian Agreement Form Welcome to the Children's Waiting Room

	1. Arrival : We offer quality early learning experiences for you child v	•
-	up to 10 minutes to help your child feel comfortable in The Children	•
	that we can start our busy day. When you and your child arrive you	WIII be asked to:
		·
	cleared and children return to the Children's Waiting Room. All	Adults must follow the public evacuation process as designated
	by the courthouse.	
	2. Participation. Please be aware that by participating in this program Children's Waiting Room.	1 you must remain in the building while your child is in the
tea pic We	3. Food: Children will be given a healthy snack. If your child has food teacher to be sure they are safe. We close during the lunch hour from pick up your child before 11.45 am. The Children's Waiting room cl We will make every effort to accommodate for late pickup if there is care room directly if such an event occurs.	1 12:00 pm to 1:15 pm. Lunch is not provided, so please plan to oses at 4:30 pm; all children should be picked up by 4:15pm.
dif	5. Health : All children need to be healthy to use the Children's Waitir difficulties, severe cough, diarrhea, vomiting, sore throat, infections of Children's Waiting Room. If your child becomes sick while in care, a	f the skin or eyes; or lice they can not be cared for in the
pos	6. Behavior Issues : The Children's Waiting Room policies have been do poses a threat to him/herself or others or is behaving in an inapproprimmediately. Behavior issues may limit your future use of the Children issues may limit your future use of the Children issues may limit your future use of the Children issues may limit your future use of the Children is the	iate manner, you will be contacted to pick your child up
	7. Pick up: Only the parent/guardian dropping the child off will be pein the Children's Waiting Room to no more than 10 minutes after pic	
Ιh	I have read, understand and agree to each of the parent/guardian pol	icies set forth in this document, and agree to hold harmless
Ch	Choices for Children, CDI/ CDC and the Superior Court of California	San Bernardino County, its agents, officers, and employees,
fro	from and against any and all claims, losses, liabilities or damages, inc	luding payment of attorney's fees arising or resulting from the
pei	performance of this Agreement.	
Pai	Parent/Guardian Signature.	Date:
Ch	Choices for Children staff	Date:

Superior Court of California, San Bernardino Children's Waiting Room Pre-Registration Form



Parent/Guardian :		Relationship.		
Mailing Address	S:	Phone:		
Child's First/Las	st Name:	Birth date.		
Does the child h	nave allergies we should be aware of?	☐ yes ☐ no (if yes, please explain)		
Does the child have medical conditions we should be aware of? ☐ yes ☐ no (if yes, please explain)				
Are there custody issues/agreements we should be aware of? □ yes □ no (if yes, please explain)				
IN CASE OF AN EMERGENCY, OR IF I CANNOT PICK-UP MY CHILD, I HERBY AUTHORIZE THE FOLLOWING PERSON(S) TO PICK-UP MY CHILD Name: Phone:				
Relationship:		an 🗖 Other		
Name:	Phone:	p		
Relationship: ☐ Mother ☐ Father ☐ Grandparent ☐ Legal Guardian ☐ Other				
IN CASE OF INJURY OR SUDDEN ILLNESS, I HERBY GIVE AUTHORITY TO ANY HOSPITAL OR DOCTOR TO RENDER IMMEDIATE AID AS MIGHT BE REQUIRED. IT IS UNDERSTOOD THAT I WILL ACCEPT THE EXPENSE OF THIS SERVICE.				
Parent/Guardia	n Signature.	Date:		