Enrollment Checklist

Welcome to Pluto Day Care! To help ensure a smooth enrollment process, please use the checklist below to confirm that all required forms, documents, and supplies have been completed or provided. Incomplete enrollment packages may delay your child's start date.

The following forms are included in this enrollment package. Please complete all sections electronically to the best of your knowledge. All required signatures and dates must be completed before the package is submitted.

To allow sufficient time for review and preparation, completed enrollment packages should ideally be submitted approximately two (2) weeks before your child's start date. At a minimum, all required forms must be received by Pluto Day Care no later than two (2) business days before your child's first day of attendance.

We understand that information may change over time. Parents/guardians may update their child's information at any time by contacting the Centre or by completing the applicable update forms available on the Parent Resources page of our website.

Required Forms

- ☐ Enrollment Form
- ☐ Emergency Contact Form
- ☐ Financial Agreement
- ☐ Diapers, Pull-Ups & Wipes Policy
- ☐ Parent Agreement & Terms of Enrollment
- ☐ Consents Page
- ☐ Important Safety Warning
- ☐ Vaccinations
- ☐ Acknowledgement of Support Services
- ☐ Non-Prescription Products & Activities Blanket Authorization Form
- ☐ Health & Medical Information
- ☐ Allergies & Restrictions Page

Additional Required Forms for Infants

- ☐ Infant Room Introductory Questionnaire
- ☐ Infant Food Chart
- ☐ Infant Feeding Schedule

Required Documents

- ☐ Immunization Record or Valid Exemption
- ☐ Emergency Medication (if applicable)
- ☐ Medical Action Plan (if applicable)
- ☐ Court Orders/Custody Documentation (if applicable)

Required Supplies for First Day

- ☐ Indoor Shoes
- ☐ Outdoor Clothing
- ☐ Extra Change of Clothes
- ☐ Diapering Supplies (if applicable)
- ☐ Ready-made Bottles/Formula/Breast Milk (Infants)
- ☐ Comfort Item (if desired)

Pluto Day Care

Enrollment Form - Please Complete In Full

Child's Legal Name: _____ Start Date: _____
First Middle Initial Last DD-MM-YYYY

Child's Home Address: _____ Unit: _____

City: _____ Postal Code: _____ Date of Birth: _____
DD-MM-YYYY

	Monday	Tuesday	Wednesday	Thursday	Friday
Arrival					
Departure					

Parent/Guardian 1 (First Person to Contact)

First & Last Name: _____ Phone: _____
First Last

Address: _____ City: _____ Postal Code: _____

Workplace/School: _____ Work/School #: _____

Relation to Child: _____ Email Address: _____

☐ Check this box if you would like the above email to receive email updates from the centre (at least 1 email per child must be checked)

Parent/Guardian 2 (Second Person to Contact)

First & Last Name: _____ Phone: _____
First Last

Address: _____ City: _____ Postal Code: _____

Workplace/School: _____ Work/School #: _____

Relation to Child: _____ Email Address: _____

☐ Check this box if you would like the above email to receive email updates from the centre (at least 1 email per child must be checked)

Please list two individuals, **other than the parents,** who may pick up your child in an emergency.
You are required to provide us with two emergency contacts. If you are unable to do so, we will require you to sign a waiver.

Emergency Contact 1

First & Last Name: _____ Phone: _____
First Last

Address: _____ City: _____ Postal Code: _____

Emergency Contact 2

First & Last Name: _____ Phone: _____
First Last

Address: _____ City: _____ Postal Code: _____

Medical History Relevant to Child Care: _____

_____

Name(s) of sibling(s) (if previously attended Pluto): _____

Getting To Know Your Child

We believe every child is unique. The information below helps us get to know your child, understand their individual needs, and support a successful transition into Pluto Day Care.

What name does your child like to be called? _____

How do you pronounce your child's name? _____

What language(s) are spoken at home? _____

Who lives in your child's home? _____

_____

Are there any cultural traditions or holidays your family celebrates that you would like us to know about? _____

_____

Does your child have any fears? _____

What helps comfort your child? _____

How does your child show they are upset? _____

How do they usually calm down? _____

Favourite toys, activities, and/or books: _____

_____

Anything you would like us to know before your child's first day? _____

_____

_____

Behaviour & Safety Information

Has your child ever:

- ☐ Bitten another child
- ☐ Frequently hit, kicked, or pushed others
- ☐ Attempted to leave adult supervision
- ☐ Climbed fences or gates
- ☐ Required one-to-one support
- ☐ Received behavioural supports
- ☐ Worked with a Resource Consultant
- ☐ Been suspended or withdrawn from another child care program

Please explain: _____

_____

_____ _____ _____

Date (DD-MM-YYYY) | Parent/Guardian Name | Parent/Guardian Signature

Pluto Day Care

Emergency Form - Please Complete In Full

Child's Legal Name: _____ Date of Birth: _____
First Middle Initial Last DD-MM-YYYY

Address: _____ Unit: _____ City: _____ Postal Code: _____

Parent/Guardian 1 (First Person to Contact)

First & Last Name: _____ Phone: _____
First Last

Address: _____ Unit: _____ City: _____ Postal Code: _____

Workplace/School: _____ Work/School #: _____

Relation to Child: _____ Email Address: _____

Parent/Guardian 2 (Second Person to Contact)

First & Last Name: _____ Phone: _____
First Last

Address: _____ Unit: _____ City: _____ Postal Code: _____

Workplace/School: _____ Work/School #: _____

Relation to Child: _____ Email Address: _____

Restrictions or Known Allergies: **We are a peanut, pork, pork product, beef, & honey free facility, do not list these unless anaphylaxis allergy**

_____

_____

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1. Child may be released to the following people: (*other* than parents, only in an emergency situation)

   Emergency Contact 1

   First & Last Name: _____ Phone: _____
   First Last

   Address: _____ City: _____ Postal Code: _____

   Emergency Contact 2

   First & Last Name: _____ Phone: _____
   First Last

   Address: _____ City: _____ Postal Code: _____

2. In case of sudden or serious illness or accident concerning my child, I give consent for appropriate treatment to be given by a qualified physician or staff member. Every effort will be made to contact parents. I understand that any expenses involved will be my responsibility.

With my signature below, I hereby give consent to the above items, numbers 1 & 2.

_____ _____ _____
Date (DD-MM-YYYY) Parent/Guardian Name Parent/Guardian Signature

Pluto Day Care

Anytime Pick-up Form

As parent/s of _____, I/we hereby give my/our permission for the following people to pick up my child at any time without me giving any further permission.

These people are:

1. Full Name: _____ Relationship to Child: _____
2. Full Name: _____ Relationship to Child: _____
3. Full Name: _____ Relationship to Child: _____
4. Full Name: _____ Relationship to Child: _____
5. Full Name: _____ Relationship to Child: _____
6. Full Name: _____ Relationship to Child: _____

For the safety and security of all children in our care, Pluto Day Care reserves the right to request valid government-issued photo identification from any individual arriving to pick up a child. All authorized pick-up and emergency contact names listed on this form must exactly match the name shown on their government-issued identification. Authorized individuals should carry valid identification with them at all times when picking up a child.

_____	_____	_____
Date (DD-MM-YYYY)	Parent/Guardian Name	Parent/Guardian Signature

Pluto Day Care

Emergency Contact Waiver Form

Only to be filled out if there are not 2 emergency contacts listed on the Emergency Form

As part of the Pluto Day Care enrolment process, parents/guardians are requested to provide the names, addresses, and telephone numbers of two emergency contacts who may be contacted if a parent/guardian cannot be reached.

As the parent/guardian of _____, I acknowledge that I have been requested to provide this information but am unable to provide it, or have chosen to provide only one or no emergency contacts. I understand that, in the event of an emergency where Pluto Day Care is unable to contact us, this may limit the centre's ability to reach an alternate person on our behalf, and I acknowledge that Pluto Day Care cannot be held responsible for any consequences resulting from the absence of emergency contact information.

_____	_____	_____
Date (DD-MM-YYYY)	Parent/Guardian Name	Parent/Guardian Signature

Pluto Day Care
Financial Agreement

1. Current monthly fees are outlined on the Fee Schedule. Fees are due on or before 6:00 p.m. on the first calendar day of each month, regardless of whether that day falls on a weekend, statutory holiday, Professional Development Day, winter closure, other scheduled Centre closure, or whether your child is absent. Payments are not deferred to the next business day when the Centre is closed. Parents/guardians are responsible for ensuring payment is received by Pluto Day Care no later than 6:00 p.m. on the first calendar day of each month.
2. Fees must be paid in accordance with the Fee Schedule. Any changes to fees will be communicated by email. Payment instructions are outlined on the Fee Schedule.
3. The following additional fees may be charged where applicable and are payable within five business days of notification:
   - Late Payment Fee
     - Overdue accounts are subject to a late payment charge of $7.50 per day, beginning immediately after the 6:00 p.m. payment deadline on the due date and continuing until Pluto Day Care has received and processed the outstanding balance.
   - Late Pick-Up Fee
     - Children must be picked up and have exited the Centre by 6:00 p.m.
     - A late pick-up fee of $25.00 will be applied at 6:01 p.m., plus an additional $2.00 per minute thereafter until the child has been picked up **and** until the child and parent/guardian have exited the Centre.
   - Lost or Additional Entry Fobs
     - A fee of $25.00 will be charged for each lost, damaged, or unreturned entry fob, or for each additional entry fob requested by a family.
4. Any outstanding fees, late charges, or other amounts owing remain payable upon withdrawal or termination of care.
5. A $200 deposit is required upon enrollment. The deposit will be applied to the final month's fees provided at least thirty (30) calendar days' written notice of withdrawal is given. Failure to provide the required notice will result in forfeiture of the deposit. Fees are not prorated or refunded for unused days during the notice period. A separate $50 deposit is required for two entry fobs ($25 each) and will be refunded when both fobs are returned in good condition.
6. Families receiving Region of Waterloo fee subsidy (in addition to CWELCC) are exempt from the entry fob deposit and will receive a door access code instead. Written confirmation of subsidy must be provided at least two weeks before the child's start date.
7. Families choosing to begin care before Region of Waterloo subsidy has been approved are responsible for all applicable fees, deposits, and registration costs. If subsidy is subsequently approved with retroactive funding, Pluto Day Care will apply a credit or issue a refund, as applicable.
8. Child care spaces cannot be held through fee payments alone. Children must attend at least once every eight consecutive weeks unless approved by the Centre Supervisor. Four consecutive weeks of absence without parent/guardian communication will be treated as abandonment and result in automatic withdrawal. Fees paid during any absence are non-refundable.
9. Fees remain payable for all scheduled days of care, regardless of attendance, including statutory holidays (except Regional Professional Development Days). Fees also remain payable during emergency closures, severe weather, utility interruptions, public health emergencies, staffing shortages, or other circumstances beyond Pluto Day Care's reasonable control.

   The Centre is closed on the following days:

   - New Year's Day
   - Family Day
   - Good Friday
   - Easter Monday
   - Victoria Day
   - Canada Day
   - August Civic Holiday
   - Labour Day
   - Thanksgiving
   - Any Regionally appointed PD Days*
   - Approximately 1 week over the Christmas/New Year's Holidays

   **Regional PD Days are the only days listed above that will not require parents to pay fees for.*
10. Failure to pay fees when due may result in suspension or termination of care. Accounts remaining unpaid for more than seven (7) days after the due date may result in immediate suspension or termination of enrollment.
11. Parents wishing to withdraw their child from care must provide at least thirty (30) calendar days' written notice. Fees remain payable during the notice period regardless of attendance.

By signing below, I acknowledge that I have read, understood, and agree to comply with the financial terms outlined above. I accept responsibility for all fees, deposits, late charges, penalties, and any other amounts owing under this agreement.

_____	_____	_____
Date (DD-MM-YYYY)	Parent/Guardian Name	Parent/Guardian Signature

Pluto Day Care

Diapers, Pull-Ups & Wipes Policy

To ensure that children remain clean, comfortable, and healthy throughout the day, parents/guardians are responsible for providing an adequate supply of diapers or pull-ups and wipes for their child at all times.

In accordance with Ministry of Education requirements, all children in diapers or pull-ups are changed at least every two (2) hours and whenever required due to soiling.

Supplies Required

Parents/guardians are responsible for ensuring their child has:

- A sufficient supply of diapers or pull-ups for each day of attendance.
- A sufficient supply of wipes.
- For children using cloth diapers: A minimum of two (2) waterproof wet bags must be provided each day to store soiled diapers and wipes. If two wet bags are not provided, cloth diapers cannot be used that day, and disposable diapers must be supplied instead.

Pluto Day Care does not keep a supply of extra diapers, pull-ups, or wipes for children

Parents are encouraged to regularly check their child's diapering supplies at pick-up each day or speak with their child's educator if they are unsure how many supplies remain. While educators will make reasonable efforts to notify families when supplies are running low, maintaining an adequate supply remains the parent/guardian's responsibility.

Insufficient Supplies

Children who arrive without the supplies necessary to safely participate in the program will not be admitted into care. Parents/guardians must either:

- Obtain the required supplies and return to the centre with their child before **9:30 a.m.**, or
- Take their child home and return on their next scheduled day with the required supplies.

For health, hygiene, and infection prevention reasons, personal items will **not** be borrowed or shared between children.

Our goal is not to cause inconvenience to families, but to ensure that every child has the necessary supplies to receive safe, hygienic, and respectful care throughout the day.

I acknowledge that I have read and understand Pluto Day Care's Diapers, Pull-Ups & Wipes Policy. I understand that it is my responsibility to ensure that my child has an adequate supply of diapers/pull-ups and wipes at the centre at all times, and I agree to comply with this policy.

_____	_____	_____
Date (DD-MM-YYYY)	Parent/Guardian Name	Parent/Guardian Signature

Pluto Day Care

Parent Agreement & Terms of Enrollment

Before You Begin

Please read this document carefully before signing. Initial each highlighted section as you review it. Your initials confirm that you have read each section. At the end of this package, you will be asked to sign the Parent Handbook Acknowledgement, confirming that you have had access to the Parent Handbook, have reviewed it, understand its contents, and agree to comply with the policies and procedures of Pluto Day Care.

I hereby enroll _____ at Pluto Day Care.

(Child's Full Name)

Fees & Payment

Fees are due on the dates established by Pluto Day Care. Accepted payment methods include:

- E-transfer
- Cash

Accounts more than seven (7) days overdue may be subject to suspension or termination of care. Late fees and outstanding balances must be paid promptly.

Initials: _____

Subsidized Care

Families awaiting subsidy approval remain fully responsible for all fees, registration charges, and deposits until official approval is received.

Where subsidy approval is retroactively applied, Pluto Day Care will provide either:

- A refund, or
- A credit toward future fees.

Initials: _____

Trial Period

The first four (4) weeks of enrollment are considered a trial period. During this time, Pluto Day Care will support the child's transition and determine whether the program can safely and appropriately meet the child's needs within the group care environment. If concerns arise, we will communicate with the family and discuss possible strategies or supports. Pluto Day Care reserves the right to discontinue care if the placement is determined to be unsuitable.

Initials: _____

Withdrawal From Care

Parents/guardians wishing to withdraw their child from care must provide a minimum of thirty (30) calendar days' written notice.

Fees remain payable throughout the notice period regardless of attendance.

Notice of withdrawal is considered effective only when received during the centre's regular business hours, Monday to Friday, 7:00 a.m. to 6:00 p.m. Notices submitted after business hours, on weekends, on statutory holidays, during scheduled centre closures (including winter closure and Professional Development Days), or on any other day the centre is closed will be deemed received on the next business day.

Initials: _____

Centre Closures

Fees remain payable by their due date for all closures below, and for any other scheduled or unexpected closure days.

Pluto Day Care will be closed on the following dates:

- New Year's Day
- Family Day
- Good Friday
- Easter Monday
- Victoria Day
- Canada Day
- Civic Holiday
- Labour Day
- Thanksgiving Day
- Any Regionally Appointed Professional Development (PD) Days*
- Approximately one week during the Christmas/New Year's holiday period**

**Fees not paid for Regionally appointed PD Days.*

***Specific Christmas/New Year's closure dates will be communicated to families annually.*

Initials: _____

Emergency Closures

Pluto Day Care reserves the right to close due to circumstances beyond its control, including but not limited to:

- Severe weather
- Power outages
- Flooding
- Fire
- Public health emergencies
- Staffing shortages
- Government directives

Families will be notified via email or phone as soon as possible of any emergency closure.

Initials: _____

Attendance & Drop-Off

To ensure children can fully participate in our daily program, all must arrive by 9:30 a.m. If your child will arrive after 9:30 a.m., parents/guardians must notify the centre in advance.

Approval of late arrivals is at the discretion of the Centre Supervisor or designate.

Examples of acceptable late arrivals include:

- Medical appointments
- Dental appointments
- Family emergencies
- Therapy appointments
- Vehicle emergencies

Examples of reasons that generally will not be approved:

- Oversleeping
- Running errands
- Non-essential appointments

Children arriving after 9:30 a.m. without prior notice may be refused admission for the day. Repeated late arrivals may result in written warnings and may affect continued enrollment.

These arrival and return times help minimize disruptions to classroom routines and educational programming while ensuring children have meaningful opportunities to participate in the daily program.

Initials: _____

Appointments During the Day

To minimize disruptions to children's routines and programming:

- Children attending an appointment must arrive at the centre by 11:00 a.m.
- Children leaving the centre for a daytime appointment must attend the program before their appointment and return no later than 2:00 p.m.

Initials: _____

Arrival Responsibility

Parents/guardians must personally hand their child over to a staff member upon arrival.

Responsibility for a child remains with the parent/guardian until the child has been signed in and received by a staff member.

Initials: _____

Parent Availability During the Day

Parents/guardians must remain reasonably available by telephone while their child is attending Pluto Day Care.
It is the responsibility of parents/guardians to:

- Ensure all telephone numbers remain current.
- Notify the Centre immediately if contact information changes.
- Ensure emergency contacts are aware they may be contacted.
- Answer or return calls from the Centre as soon as possible.

If a child becomes ill, injured, or otherwise requires immediate pick-up, parents/guardians are expected to arrange for their child to be collected within 60 minutes, unless otherwise directed by the Centre Supervisor.

Initials: _____

Pick-Up Policy

Children must be picked up and out of the building by 6:00 p.m.
Late pick-up fees will apply as follows:

- $25.00 will be applied at 6:01 p.m., plus $2.00 per minute thereafter until the child has been picked up **and** all parties have vacated the premises.

Repeated late pick-ups may result in termination of care.

Initials: _____

Authorized Pick-Up Persons

Parents/guardians must notify the centre in advance if someone else will be picking up their child. Authorized individuals must provide government-issued photo identification before a child will be released.

Initials: _____

Security & Entry Credentials

Parents/guardians must use their assigned key fob or access code when entering the Centre. Fobs and access codes must not be shared with unauthorized individuals, and families must not permit unknown individuals to enter behind them. Lost fobs or compromised access codes must be reported immediately.

Initials: _____

Maintaining Enrollment

A child will be automatically withdrawn from care if they are absent for eight (8) consecutive weeks after providing written notice to the Centre, or absent for four (4) consecutive weeks without any parent/guardian communication. An exception may be made when the Centre receives a note from a Canadian physician or nurse practitioner advising that the child must remain out of care for medical reasons. The note must be provided before the end of the eight-week period and include the recommended exclusion dates. In all other cases, fees paid during the absence are non-refundable, the childcare deposit will be forfeited, and the space will be released.

Initials: _____

Safe Arrival & Absence Reporting

Parents/guardians must notify the centre by 9:00 a.m. if their child will be absent on a scheduled day. If no notification is received, Pluto Day Care will follow its Safe Arrival and Dismissal Policy. Repeated unexplained absences may result in a review of a child's continued placement.

Initials: _____

Legal Custody Arrangements

Where legal custody, decision-making responsibility, parenting time, or access arrangements exist, parents/guardians must provide the Centre Supervisor with copies of all relevant, up-to-date legal documentation. Please note that unless Pluto Day Care has received official court orders or other legally enforceable documentation, we are not permitted to withhold a child from a parent or legal guardian, or restrict their access to the child. Parents/guardians are responsible for notifying the centre immediately of any changes to legal custody or access arrangements and for providing updated documentation as applicable.

Initials: _____

Emergency Contact Information

Parents/guardians are responsible for ensuring all contact information remains current.

This includes:

- Home address
- Phone numbers
- Email addresses
- Emergency contacts

Pluto Day Care shall not be responsible for consequences resulting from outdated or inaccurate information provided by parents/guardians.

Initials: _____

Personal Property

Pluto Day Care is not responsible for lost, damaged, or stolen personal belongings. All clothing and personal items should be clearly labelled.

Initials: _____

Child Behaviour & Safety Policy

All children, families, and staff have the right to a safe, respectful, and non-threatening environment.

Pluto Day Care will make reasonable efforts to support children experiencing behavioural, emotional, developmental, or social challenges. This may include observation, documentation, communication with families, implementation of behaviour support strategies, and referrals to outside professionals or community resources where appropriate.

However, where a child's behaviour poses a significant risk to the safety, well-being, or learning environment of other children, staff, or themselves, alternative arrangements or withdrawal of care may be necessary.

Examples of behaviours that may result in suspension or dismissal from the program if they are severe, persistent, or do not improve despite reasonable intervention efforts include, but are not limited to:

- Repeated biting resulting in injury to others
- Repeated hitting, kicking, punching, or aggressive physical behaviour
- Throwing objects with the intent to harm or that create a safety risk
- Bullying, intimidation, or targeted harassment of other children
- Persistent verbal aggression, threats, or abusive language
- Repeated attempts to run away from staff supervision or leave designated program areas
- Deliberately damaging daycare property or the property of others
- Behaviour that places the child, other children, or staff at risk of serious injury
- Persistent refusal to follow safety rules after consistent intervention and support
- Behaviour that significantly disrupts the program and prevents staff from safely supervising the group
- Any behaviour requiring staffing levels or supports beyond what Pluto Day Care can reasonably provide

Pluto Day Care will assess each situation individually and, where possible, work collaboratively with families and community supports before considering dismissal. However, the safety and well-being of all children and staff will remain the centre's primary consideration in all decisions regarding continued enrollment.

Initials: _____

Food & Allergy Restrictions

Outside food requires advance approval from the Centre Supervisor and is generally limited to infant feeding needs, diagnosed medical or special needs, or severe/multiple food allergies. Approved food must include a complete ingredient list and follow all Centre food and allergy restrictions.

Celebration treats for children must be store-bought, in their original packaging, labelled school-safe, and include a complete ingredient list. Products from donut shops are not permitted due to cross-contamination risks.

Treats intended only for staff are exempt from these requirements but should identify whether they contain nuts whenever possible. Staff treats must be given directly to the office for placement in the staffroom.

Initials: _____

Illness Exclusion Policy

To protect the health and safety of all children and staff, Pluto Day Care follows Region of Waterloo Public Health guidelines. Children **must** remain home when experiencing the following symptoms of illness.

1. **Fever**

   A fever is defined as: 38°C (100.4°F) or higher.

   Children sent home with a fever will be excluded:

   - The day symptoms occur, the following day, and
   - Until they have been fever-free for at least 24 hours without fever-reducing medication.

2. **Enteric Illnesses (Vomiting & Diarrhea)**

   To help prevent the spread of gastrointestinal illness within the centre

   A child must be sent home if they experience:

   - Two (2) or more episodes of diarrhea, or
   - Two (2) or more episodes of vomiting, or
   - One (1) episode of vomiting and one (1) episode of diarrhea.

Children sent home with enteric symptoms will be excluded:

- The day symptoms occur, a minimum of 2 days after the exclusion day, and
- Until they have been symptom-free for at least 48 hours after their last episode of vomiting or diarrhea.

Please Note:

- The 48-hour exclusion period restarts after every new episode of vomiting or diarrhea.
- If a child experiences additional episodes after returning home, the exclusion period begins again from the most recent episode.

Initials: _____

Other Illnesses

Pluto Day Care reserves the right to exclude any child who shows signs or symptoms of a contagious illness, is suspected of having an illness that may spread to others, or is not well enough to safely participate in the daily program, including outdoor play. This decision may be made even if a diagnosis has not yet been confirmed or the illness is not specifically addressed by Public Health guidance.

To help protect the health and safety of everyone in the centre, Pluto Day Care may require:

- A child to remain at home until they have been symptom-free for a specified period of time;
- A physician's note confirming the child is fit to return; and/or
- Compliance with any additional exclusion or return-to-care requirements established by Public Health or by the Centre Supervisor.

The Centre Supervisor's decision regarding a child's ability to attend is final.

Initials: _____

Medical Emergencies

If a medical emergency occurs, Pluto Day Care will seek emergency medical assistance if a parent/guardian or emergency contact cannot be reached. Any costs associated with emergency treatment or transportation are the responsibility of the parent/guardian.

Initials: _____

Parent Communication Regarding Illness

Parents/guardians must provide specific symptoms when reporting illness-related absences (e.g., fever, vomiting, diarrhea, persistent cough, or poor sleep due to illness).
Please note:

- General statements such as *"sick"* or *"not feeling well"* may result in the standard exclusion period being applied until additional information is received.
- Children may not attend while symptoms are being masked by medication.
- Pluto Day Care reserves the right to refuse admission to any child who appears unwell.
- Providing false or misleading information regarding a child's illness or symptoms may result in suspension or termination of care.

Initials: _____

Prescription Medication

Prescription medication may be administered only with written parent/guardian authorization and must be provided in its original pharmacy-labelled container that shows the child's name, medication, prescribing physician or nurse practitioner, dosage, and administration instructions.

Medication is administered by trained staff in accordance with applicable legislation and Public Health requirements. A second staff member verifies that the correct child, medication, dosage, time, and method of administration are correct before both staff members complete the Medication Administration Record.

Parents/guardians are responsible for ensuring medications remain clearly labelled, unexpired, and up to date, and for notifying the Centre of any changes to their child's medication or treatment plan.

Initials: _____

Medical Plans

Some children require an Individualized Medical Management Plan to support their health and safety while attending Pluto Day Care. Plans are developed collaboratively with parents/guardians based on recommendations from the child's physician or nurse practitioner. Common examples include, but are not limited to:

- Anaphylaxis (severe allergies)
- Seizure disorders
- Diabetes
- Other medical conditions requiring specialized care or emergency intervention

Parents/guardians must provide medical documentation outlining the child's diagnosis, symptoms, recommended treatment, emergency procedures, and any required medications.

Medical Management Plans are reviewed at least annually and updated whenever the child's medical condition, medication, treatment recommendations, or emergency procedures change.

Initials: _____

Non-Prescription Medication

Pluto Day Care does not routinely administer non-prescription (over-the-counter) medications.

In limited circumstances, non-prescription medication may be administered as part of an approved Individualized Medical Plan based on the recommendations of the child's physician or nurse practitioner. Examples include:

- Fever-reducing medication (e.g., Tylenol®, Advil®) for children at risk of febrile seizures. A written recommendation from the child's physician or nurse practitioner and an approved Medical Management Plan are required.
- Allergy medication (e.g., Benadryl®) included as part of a child's current Anaphylaxis Plan. A separate physician's note is not required.

The Centre may request updated medical documentation whenever necessary to ensure the safe administration of medication.

Initials: _____

Emergency Medication

Children requiring emergency medication (such as an EpiPen®, asthma inhaler, seizure medication, or other prescribed emergency medication) must have a current, non-expired medication available at the Centre at all times.

Where applicable, an individualized Medical Management Plan or Anaphylaxis Plan will be developed in collaboration with the parent/guardian and must be kept current.

Parents/guardians are responsible for:

- Providing all required emergency medications before their child's first day of attendance.
- Replacing medications before they expire.
- Notifying the Centre of any changes to their child's medical condition, treatment plan, or prescribed medication.

Children requiring emergency medication will not be permitted to attend the program until the required medication has been provided.

Initials: _____

Illness Outbreaks & Modified Exclusion Requirements

Pluto Day Care follows the guidance and directives of Region of Waterloo Public Health and any other applicable public health authorities regarding illness outbreaks within the centre.

In the event of a declared outbreak, suspected outbreak, or increased incidence of illness within the program, Pluto Day Care reserves the right to implement additional health and safety measures to help prevent the spread of illness and protect the well-being of children and staff.

These measures may include, but are not limited to:

- Modifying exclusion periods for specific illnesses or symptoms;
- Requiring exclusion after a single episode of vomiting or diarrhea;
- Requiring medical clearance prior to a child's return to care;
- Enhanced screening and monitoring procedures;
- Temporary restrictions on attendance for symptomatic children;
- Additional cleaning, sanitization, and infection prevention measures; and
- Any other requirements directed by Public Health authorities.

Parents/guardians are required to promptly inform the centre of any symptoms, diagnoses, communicable illnesses, or outbreaks within their household that may affect the health and safety of the child care environment.

Failure to comply with outbreak-related requirements may result in a child's exclusion from care until all applicable public health and centre requirements are met.

Pluto Day Care reserves the right to modify illness exclusion requirements and return-to-care criteria at any time in response to public health recommendations, outbreak conditions, or concerns regarding the health and safety of children and staff.

Initials: _____

Parent Code of Conduct

Parents/guardians and all persons associated with the family are expected to communicate and behave respectfully toward children, families, staff, students, volunteers and visitors. Harassment, discrimination, intimidation, threats, abusive language, violence, sexual harassment, filming or recording staff without consent, property damage, or entering the Centre while impaired will not be tolerated. Pluto Day Care may end a conversation, require an individual to leave the property, restrict their access where legally permitted, contact law enforcement and/or suspend or terminate enrollment where conduct compromises the safety, security, well-being or operation of the Centre.

Initials: _____

Our Expectations of Families

To help us provide the safest and highest quality care possible, we ask every family to:

- Keep emergency contact information current.
- Notify us of changes to custody arrangements.
- Read Centre emails and important notices.
- Arrive on time for drop-off and pick-up.
- Pick up sick children within 60 minutes.
- Keep emergency medications current.
- Supply required clothing and diapering supplies.
- Label all belongings.
- Report contagious illnesses promptly.
- Treat children, families, and staff with kindness and respect.
- Pay child care fees on time.
- Follow Centre policies and procedures.

Working together allows us to provide the best possible experience for every child.

Initials: _____

Grounds for Termination of Care

Pluto Day Care reserves the right to terminate services for reasons including but not limited to:

1. Non-payment of monthly fees (after five business days).
2. Repeated late fee payments (two or more).
3. Repeated late pick-ups (two or more).
4. Failure to comply with the Parent Handbook, Enrollment Agreement, or Centre policies and procedures.
5. Failure to comply with illness exclusion policies or other health and safety requirements.
6. Providing false, misleading, or incomplete information at enrollment or during a child's attendance.
7. Failure to provide or maintain required emergency medication, emergency contact information, immunization records, or valid exemption documentation.
8. Failure to disclose significant medical, developmental, behavioural, or support needs that may impact the child's care or the safety of others.
9. Refusal to participate in recommended support planning or community services when reasonably required to support a child's successful participation in the program.
10. Behaviour by a child that cannot be safely supported despite reasonable interventions, as outlined in the **Behaviour & Safety** section of the Parent Handbook.
11. Chronic absenteeism without reasonable explanation or failure to physically attend the program for more than eight consecutive weeks.
12. Intoxication or impairment while on Pluto Day Care property.
13. Verbal abuse, harassment, discrimination, intimidation, threats, violence, sexual harassment, or other inappropriate conduct toward children, families, staff, volunteers, or visitors.
14. Any conduct that compromises the safety, security, well-being, or operation of the centre.
15. Any other circumstance where Pluto Day Care determines that continued enrollment is no longer in the best interests of the child, other children, families, staff, or the operation of the program.

Initials: _____

Immediate Termination of Care

Whenever reasonably possible, Pluto Day Care will communicate concerns and provide the family with an opportunity to resolve them. However, Pluto Day Care reserves the right to suspend or terminate care immediately and without notice where the health, safety, security or well-being of any child, family member, employee or other person, or the safe operation of the Centre, is at risk.

Initials: _____

Privacy

Pluto Day Care collects personal information solely for the purpose of providing child care services and complying with applicable legislation. Personal information will be handled confidentially and shared only where required by law or necessary to ensure the child's safety and well-being.

Initials: _____

Parent Handbook Acknowledgement

Pluto Day Care provides every enrolled family with access to the current Parent Handbook, which outlines the Centre's policies, procedures, expectations, and important information regarding your child's care.

I acknowledge that:

- ☐ I have been provided with access to the current Pluto Day Care Parent Handbook.
- ☐ I have read, or have had the opportunity to read, the Parent Handbook in its entirety.
- ☐ I understand the policies, procedures, and expectations outlined within the Parent Handbook.
- ☐ I agree to comply with the Parent Handbook and understand that it forms part of my child's enrollment with Pluto Day Care.
- ☐ I understand that Pluto Day Care may update the Parent Handbook from time to time to reflect changes in legislation, licensing requirements, Public Health guidance, or Centre operations, and that I am responsible for reviewing any future updates provided by the Centre.

Initials: _____

Acknowledgement

I acknowledge that I have read, understood, and agree to comply with the policies and procedures outlined in this Terms & Conditions document.

Parent/Guardian:

Name: _____

Signature: _____

Date: _____
(DD-MM-YYYY)

Centre Representative:

Name: _____

Signature: _____

Date: _____
(DD-MM-YYYY)

For Office Use Only - All Dates In DD-MM-YYYY Format

Date Spot was Accepted: _____ Start Date: _____

Amount Paid: _____ Date Deposit Paid: _____

Deposit Paid By: ☐ Cash ☐ Etransfer

Date of Withdrawal Notice: _____ Last Day of Care : _____

30 Days Notice Provided: ☐ Yes ☐ No If yes, Date Refund Given: _____ Cheque Number: _____

Authorized Signature: _____ Position: _____

Pluto Day Care

Consents

The following consents each need their own signatures.
Please make sure that you read through each thoroughly & sign each one individually.

1. Supervised Walks

I, as the parent/guardian of _____, give permission for my child to participate in supervised walks during their time at Pluto Day Care.

_____ _____
Date (DD-MM-YYYY) Parent/Guardian Signature

---

2. Emergency Medical Treatment

In the event of a sudden serious illness or accident involving my child, I authorize appropriate first aid or emergency treatment to be provided by a qualified staff member while every reasonable effort is made to contact the parent(s)/guardian(s). I understand that any expenses incurred as a result of such treatment will be my responsibility.

_____ _____
Date (DD-MM-YYYY) Parent/Guardian Signature

---

3. Responsibility for Child While on the Premises

I understand that while I am on the premises of Pluto Day Care, responsibility for my child's care and supervision remains with me. Responsibility transfers to Pluto Day Care staff only once my child has been personally received and acknowledged by a staff member. I agree to deliver my child directly to a teacher each day.

_____ _____
Date (DD-MM-YYYY) Parent/Guardian Signature

---

4. Prohibited Items

My signature below confirms that I understand the following items must never be left in my child's cubby or diaper bag:

- Drugs or medications
- Vitamins
- Drops
- Diaper creams
- Sunscreen
- Inhalers
- Any other item that could pose a poisoning or safety risk to any child

I understand that these items could be accessed by my child or another child, creating a serious safety hazard.

_____ _____
Date (DD-MM-YYYY) Parent/Guardian Signature

---

5. Photograph Consent

Throughout the day, photographs will be taken of children participating in activities for documentation within the daycare. With your permission, photographs may also be used on Pluto Day Care's website and/or Facebook page.

My signature below confirms that, in addition to photographs taken for documentation and use within the Centre, I give Pluto Day Care permission to use photographs of my child for the external platforms selected below:

Child's Name: _____

☐ Pluto Day Care's Website ☐ Pluto Day Care's Facebook Page ☐ Neither the Website nor Facebook

_____ _____
Date (DD-MM-YYYY) Parent/Guardian Signature

Pluto Day Care
Important Safety Warning

The safety of every child in our care is our highest priority. We ask that parents/guardians help us reduce preventable injuries by ensuring their child is dressed in safe clothing and appropriate footwear each day.

Clothing Safety

Each year in Canada, children are seriously injured or killed when drawstrings or ties on clothing become caught on playground equipment, fences, or other objects, creating a strangulation hazard.

For your child's safety, we strongly recommend that children **do not** wear clothing with:

- Drawstrings or ties on hoods
- Drawstrings or ties on jackets or coats
- Ties on hats
- Strings on mittens, scarves, or other clothing

Many Canadian manufacturers have eliminated these hazards by replacing drawstrings with elastic or Velcro closures. However, older clothing, hand-me-downs, or clothing purchased from other countries may still contain these potentially dangerous features.

If your child's clothing includes any of the items listed above, we strongly encourage you to remove or replace them before your child attends Pluto Day Care.

Footwear Safety

Children participate in active indoor and outdoor play every day, including running, climbing, jumping, and using playground equipment. Proper footwear is essential for reducing the risk of slips, trips, falls, and foot injuries.

For this reason:

- **Flip-flops are not permitted** at Pluto Day Care.
- **Crocs are permitted only when the heel/back strap is worn securely around the heel at all times.** Crocs worn without the back strap do not provide adequate support and increase the risk of slips, trips, and falls.
- Children should wear secure, well-fitting shoes that provide good support and allow them to safely participate in all daily activities.

Failure to send your child with appropriate footwear may result in their being unable to participate in certain activities until suitable footwear is provided.

Parent Acknowledgement

By signing below, I acknowledge that Pluto Day Care has informed me of these clothing and footwear safety recommendations and requirements. I understand the potential risks associated with unsafe clothing and inappropriate footwear and agree to make every reasonable effort to ensure my child attends the centre dressed in a safe and appropriate manner.

_____	_____	_____
Date (DD-MM-YYYY)	Parent/Guardian Name	Parent/Guardian Signature

Pluto Day Care &
Region of Waterloo Public Health

Vaccinations

Ontario's child care legislation requires licensed child care centres to obtain proof that each child has received the immunizations appropriate for their age, as recommended by the local Medical Officer of Health, before admission. A child may be exempt for medical reasons or because of a parent/guardian's conscience or religious beliefs when the required exemption documentation has been completed and provided to the Centre.

Children who are not fully immunized, including those with a valid exemption, may be excluded from care during an outbreak or possible exposure to a vaccine-preventable disease, as directed by Public Health.

When to get vaccines for your baby or toddler
You should vaccinate your children during their first and second years.

First-year vaccinations:
At 2 and 4 months old, babies should receive the following vaccines:

- Diphtheria, tetanus, pertussis, polio, Haemophilus influenzae type b
- Pneumococcal conjugate
- Rotavirus

At 6 months old, babies should receive the following vaccines:

- Diphtheria, tetanus, pertussis, polio, Haemophilus influenzae type b

At 12 months old, babies should receive the following vaccines:

- Pneumococcal conjugate
- Meningococcal conjugate
- Measles, mumps and rubella

Second-year vaccinations
At 15 months old, babies should receive the following vaccines:

- Varicella (chickenpox)

At 18 months old, babies should receive the following vaccines:

- Diphtheria, tetanus, pertussis, polio, Haemophilus influenzae type b

The law
Children who attend child care & school in Ontario must have proof of immunization against:

- Diphtheria
- Tetanus
- Polio
- Measles
- Mumps
- Rubella
- Meningococcal disease
- Whooping cough (pertussis)
- Varicella (chickenpox) – required for children born in 2010 or later

As are age-appropriate.

Parents are required to:

- Provide records of their child's immunization to the Waterloo Region Public Health unit
- Update the information when their child receives additional doses of vaccine according to the immunization schedule

_____	_____	_____
Date (DD-MM-YYYY)	Parent/Guardian Name	Parent/Guardian Signature

Pluto Day Care &
Special Needs Resource Collaborative of Waterloo Region
Acknowledgement of Support Services

Waterloo Region's Special Needs Resourcing Collaborative (SNRC) supports licensed child care programs to identify and meet the diverse needs of all children and their families.

All children, regardless of their abilities, are supported to thrive in quality inclusive early learning environments.

As a licensed Early Learning Child Care in Waterloo Region, our program is fortunate to be supported by Resource Consultants (KW Habilitation) and Clinicians (KidsAbility) who are team members from the SNRC. Resource Consultants and Clinicians visit and observe our program regularly and may provide an Environment Support Plan (a document that provides universal strategies to support our team, classrooms/programs), resources and training. Consultation supports all children in the group through strategies around child development, behaviour, group management, and environment. This support can be provided for the whole group and may include recommendations intended to help strengthen your child's sense of belonging within their program.

Resource Consultants and Clinicians have the ability to provide support both in person and virtually. On rare occasions and as needed, they can provide virtual consultation through an approved platform as well as through email and/or phone calls. Virtual consultations will not be recorded and will only be used for observation purposes, to help provide appropriate resources and strategies.

While Resource Consultants and Clinicians are observing our program, they may find that some children would benefit from individualized support with certain areas of their development. If this happens, a conversation will take place between yourself and the Educator, Resource Consultant and/or Clinician.

As members of our team, all Resource Consultants and Clinicians follow specific confidentiality policies and are aware of our behaviour guidance policies. Should you have any further questions regarding the role of the SNRC team, our Supervisor/Director, Resource Consultant or Clinician would be happy to review this with you.

I acknowledge that the support services provided by the Waterloo Region's Special Needs Resourcing Collaborative have been reviewed with me, and I understand that this will be a valuable part of my child's experience in licensed child care program

_____	_____	_____
Date (DD-MM-YYYY)	Parent/Guardian Name	Parent/Guardian Signature

Funding for the Special Needs Resourcing Collaborative is provided by the Region of Waterloo and the Province of Ontario.

Pluto Day Care

Non-Prescription Products & Activities Blanket Authorization

Child's Name: _____ **Date of Birth:** _____
(DD-MM-YYYY)

This authorization allows Pluto Day Care educators to apply the non-prescription products and provide the activities indicated below during your child's enrollment.

This authorization will remain in effect for the duration of your child's enrollment at Pluto Day Care unless withdrawn or updated in writing by the parent/guardian.

Please check all that apply.

Parent-Supplied Products

I authorize Pluto Day Care staff to apply the following parent-supplied, clearly labelled products to my child as required.

☐ Sunscreen *(During warmer months, sunscreen should be applied by parents before arrival whenever possible. Pluto Day Care will reapply sunscreen throughout the day in accordance with the authorization provided.)*
****If parents choose not to supply sunscreen, they will need to sign our Sunscreen Waiver****

☐ Moisturizing Skin Lotion

☐ Lip Balm

☐ Non-Prescription Diaper Cream

☐ Insect Repellent

Please Note:

- All products supplied by families must be clearly labelled with the child's full name.
- Parents/guardians are responsible for ensuring products are provided and replaced as needed.
- All above products supplied must be within their valid expiration dates.

Centre-Supplied Products & Activities

I authorize Pluto Day Care staff to provide or apply the following centre-supplied products and activities as appropriate.

☐ Hand Sanitizer

☐ Temporary Tattoos

☐ Hair Elastics

Parent/Guardian Acknowledgement

I understand that:

- Only the products and activities authorized above will be used or provided.
- Parent-supplied products must be clearly labelled with my child's full name.
- I am responsible for replacing parent-supplied products when they become empty or expire.
- I may update or withdraw this authorization at any time by providing written notice to Pluto Day Care.

_____ _____ _____
Date (DD-MM-YYYY) Parent/Guardian Name Parent/Guardian Signature

Pluto Day Care
Health & Medical Information

Dear Parent/Guardian;

Please provide any information regarding

- Chronic medical problems (eg, diabetes, asthma, epilepsy, or other diseases)
- Impairments or disabilities (eg, vision, hearing, speech, autism)
- Allergies (eg, drug, food, insect bites, pets and animals, environmental)
- Routine Medications (eg, phenobarbital, ritalin etc.), please provide dosage & frequency

Child's Name:_____
First Middle Initial Last

Chronic Medical Problems ☐ Yes ☐ No

If yes, please describe: _____

_____

_____

Impairments or Disabilities ☐ Yes ☐ No

If yes, please describe: _____

_____

_____

Allergies ☐ Yes ☐ No

If yes, please describe: _____

_____

_____

Routine Medications ☐ Yes ☐ No

If yes, please describe: _____

_____

_____

_____ _____ _____
Date (DD-MM-YYYY) Parent/Guardian Name Parent/Guardian Signature

Allergies & Restrictions

This is a list of all of the ingredients we have within our centres. We are a beef, pork & pork product, shellfish, honey, and nut-free facility.

Please put an "X"in the correct column only if your child has an allergy or restriction to a food.

R = Restriction A = Allergy Ax = Anaphylaxis

Vegetables	R	A	Ax
Black Beans			
Broccoli			
Brown Beans			
Carrots			
Celery			
ChickPeas			
Corn			
Cucumber			
Green Beans			
Green Peppers			
Kidney Beans			
Lentils			
Lima Beans			
Onion			
Orange Peppers			
Peas			
Potatoes			
Red Peppers			
Spinach			
Sweet Potatoes			
Tomatoes			
Yellow Peppers			
Zucchini			

Fruit	R	A	Ax
Applesauce			
Bananas			
Blackberries			
Blueberries			
Cantelope			
Honeydew			
Lemon			
Mandarins			
Navel Oranges			
Peaches			
Pineapple			
Raspberries			
Raisins			
Strawberries			
Watermelon			

Breads/Grains	R	A	Ax
Cookies/Biscuits			
Wheat Bread			
Cheerios			
Crackers			
English Muffins			
Wheat Flour			
Oats			
Pasta			
Brown Rice			
Pancakes			

Meat & Dairy	R	A	Ax
Basa			
Chicken			
Cod			
Tuna			
Cheddar Cheese			
Cottage Cheese			
Cream Cheese			
Cream			
Eggs			
French Dressing			
Margarine			
Mayonnaise			
Milk			
Mozzarella			
Parmesan			
Ranch Dressing			
Sour Cream			
Yogurt			

Seasonings	R	A	Ax
Basil			
Black Pepper			
Chili Powder			
Cinnamon			
Curry Powder			
Cocoa Powder			
Dill			
Garlic			
Italian Seasoning			
Jam			
Ketchup			
Onion Powder			
Oregano			
Mustard			
Parsley			
Salsa			
Sesame Seeds			
Soya Sauce			
Syrup			
Taco Seasoning			
Thyme			
Vanilla			

Child's First & Last Name: _____

Date of Birth: _____
DD-MM-YYYY

Centre: _____

Please provide any missed items or additional details we may need to know about your child's food restrictions or allergies. Please only list items not on this list if you child has an anaphylaxis allergy to them.

_____

_____

_____

_____ _____ _____

Today's Date Parent Name Parent Signature

Pluto Day Care

Infant Room Introductory Questionnaire

Welcome to Pluto Day Care!

To help make your child's transition into our Infant Program as smooth as possible, please complete the following questionnaire. The information you provide helps our educators understand your child's routines, preferences and individual needs. As your child's routines change, please keep us informed so we can continue providing individualized care.

Child's Name: _____ Date of Birth: _____
DD-MM-YYYY

Comfort & Soothing

Uses a soother ☐ Yes ☐ No

If yes, when may it be used? ☐ Anytime ☐ Sleep Only ☐ Comfort Only ☐ Other: _____

Comfort item (blanket/stuffed toy)? ☐ Yes ☐ No Describe: _____

How is your child most easily comforted when upset?

☐ Rocking ☐ Cuddles ☐ Singing ☐ Soother ☐ White Noise ☐ Other: _____

Feeding

Current milk: ☐Breast Milk ☐ Formula ☐ Whole Milk ☐ Other: _____

Typical feeding schedule: _____

Bottle warmed? ☐ Yes ☐ No

Preferred warming instructions: _____

Drinks from: ☐ Bottle ☐ Sippy Cup ☐ Straw Cup ☐ Open Cup ☐ Learning

Self-feeds? ☐ Yes ☐ No ☐ Learning

Uses a spoon? ☐ Yes ☐ No ☐ Learning

Sleep Routine

Typical naps per day: ☐ 1 ☐ 2 ☐ 3+

Usual nap times: Morning _____ Afternoon _____

Typical nap length: ☐ 30 min ☐ 1 hr ☐ 1.5 hrs ☐ 2+ hrs

Falls asleep: ☐ Independently ☐ Rocked ☐ Held ☐ Back Rub

☐ Other: _____

Diapering

Diaper type: ☐ Disposable ☐ Cloth

If cloth diapers are used, at least two waterproof wet bags must be provided daily.

Diaper cream used? ☐ Yes ☐ No Brand: _____

Development

Currently: ☐Rolling ☐ Sitting ☐ Crawling ☐ Pulling to Stand ☐ Cruising ☐ Walking

Words, sounds or signs your child responds to:

_____

Favourite songs, activities or interests:

_____

Getting to Know Your Child

How does your child let you know they are hungry?

_____

How does your child let you know they are tired?

_____

What comforts your child the most?

_____

Are there any family routines, cultural practices, words or preferences you would like us to incorporate when possible?

_____

What are your goals or hopes for your child's time in our Infant Program?

_____

Is there anything else you would like us to know?

_____

_____

_____

_____

_____	_____	_____
Date (DD-MM-YYYY)	Parent/Guardian Name	Parent/Guardian Signature

Pluto Day Care

Infant Food Chart

Child's Name:	Location:
Parents, please check the box next to any food your child *has already* eaten.	

Vegetables	Fruit	Meat & Dairy	Breads & Grains	Seasonings
☐ Black Beans	☐ Apples	☐ Basa	☐ Cookies/Biscuits	☐ Basil
☐ Broccoli	☐ Applesauce	☐ Chicken	☐ Whole Wheat Bread	☐ Black Pepper
☐ Brown Beans	☐ Bananas	☐ Cod	☐ Cheerios	☐ Chili Powder
☐ Carrots	☐ Blackberries	☐ Tuna	☐ Crackers	☐ Cinnamon
☐ Celery	☐ Blueberries	☐ Cheddar Cheese	☐ English Muffins	☐ Curry Powder
☐ Chickpeas	☐ Canteloupe	☐ Cottage Cheese	☐ Whole Wheat Flour	☐ Cocoa Powder
☐ Corn	☐ Honeydew	☐ Cream Cheese	☐ Oats	☐ Dill
☐ Cucumber	☐ Lemon	☐ Cream	☐ Pasta	☐ Garlic
☐ Green Beans	☐ Mandarins	☐ Eggs	☐ Brown Rice	☐ Italian Seasoning
☐ Green Peppers	☐ Oranges	☐ French Dressing	☐ Pancakes	☐ Jam
☐ Kidney Beans	☐ Peaches	☐ Margarine		☐ Ketchup
☐ Lentils	☐ Pineapple	☐ Mayonnaise		☐ Onion Powder
☐ Lima Beans	☐ Raspberries	☐ Milk		☐ Oregano
☐ Onion	☐ Raisins	☐ Mozzarella		☐ Mustard
☐ Orange Peppers	☐ Strawberries	☐ Parmesan		☐ Parsley
☐ Peas	☐ Watermelon	☐ Ranch Dressing		☐ Salsa
☐ Potatoes		☐ Sour Cream		☐ Sesame Seeds
☐ Red Peppers		☐ Plain Yogurt		☐ Soya Sauce
☐ Spinach		☐ Fruit Yogurt		☐ Syrup
☐ Sweet Potatoes				☐ Taco Seasoning
☐ Tomatoes				☐ Thyme
☐ Yellow Peppers				☐ Vanilla
☐ Zucchini				

Is there anything on this list that you do not want your child introduced to yet?

_____

_____

_____

_____

_____ _____ _____

Date (DD-MM-YYYY) Parent/Guardian Name Parent/Guardian Signature

Pluto Day Care

Infant Feeding Schedule

Must be completed for all children less than 12 months old

Name of child: _____ Date of Birth: _____
DD - MM - YYYY

General Instructions for Feeding:

Bottles: type of milk, amounts, warming preferences, and times to be given.

Food: type (cereal, baby food, table food), amounts & times to be given.

_____ _____ _____
Date (DD-MM-YYYY) Parent/Guardian Name Parent/Guardian Signature

---

Pluto Day Care Use Only

Record of eating habit change:

Introduce	New Instruction	Date DD-MM-YY	Staff Name	Staff Signature
Cereal				
Baby Food				
Table Food				