



# KOT Handbook and Registration Packet



## Mission

The mission of Kids On Target is to provide a safe, positive, child-centered environment where children can explore hands on educational activities and develop age appropriate social skills. Kids On Target staff is committed to the success of all children we serve. We want to give you the KOT advantage: keeping your children engaged, energized, and excited to learn!

*Revised January 25*

### **Statement from Director**

We welcome you to our program. Our staff would like to take this opportunity to thank you for sharing your child with us. Immaculate Conception School's Kids On Target program admits children of any race, color, handicap, national origin, ethnic group or religious belief.

### **Licensure**

Our program is licensed by the State of South Dakota through the Department of Social Services, and therefore complies with the childcare regulations as set forth by the State of South Dakota. Children are supervised at all times. We have a staff to child ratio of 1:15 in Regular KOT and 1:10 in Junior KOT.

### **Days/Hours of Operation**

**Summer Daily Schedule:** Kids On Target will be open Monday-Friday 6:30a.m.-6:00 p.m.

**School Year Daily Schedule:** Kids on Target will be open Monday - Friday 6:45am - 8am and 3:20pm - 6pm at our IC School location and Monday-Friday 7:30am-8:15am and 3:20pm-6pm at our Holy Name Campus.

### **Key Cards/Access to the Building**

You will have \$10 billed to your account for each key card.

Parents **MUST** have a Key Card to gain access to the IC School for pick up and drop off. The doorbell **on** the double doors is only to be used during special circumstances as this requires a staff member to leave the children to open the door.

### **Before and After School KOT Age Guideline**

Kindergarten through 6th Grade at IC School  
PreK/Enrichment at Holy Name Campus

### **Summer KOT Age Guideline**

Age 5 through going into 4th Grade

### **Enrollment Policy and Procedures**

The following steps must be completed for each child, before the child can begin to participate in our program. Paperwork must be filed each session.

1. Complete the **Registration Form** including the Parent Policy Acknowledgement, and pay a one-time fee of \$10.00.
2. Complete **Form A: Kids On Target Emergency Medical Care Authorization**
3. Complete **Form B: Kids On Target Emergency Transportation Permission**
4. Complete **Form C: Kids On Target Information Sharing Policy**
5. Complete **Form D: Kids On Target Field Trip Permission Form**
6. Complete **Form E: Kids On Target Movie Viewing Permission Form**

**IF INFORMATION CHANGES IT IS UP TO THE PARENT/GUARDIAN TO INFORM STAFF**

### **Fee Policy**

**Rate per child:** The rate will be \$3.75 per hour for students enrolled at Immaculate Conception School PreK-6th grade. Non-IC School students will have a \$4.25 per hour rate. Each child will be charged a minimum of 1 hour

per day. After 1 hour, child care will be billed in ½ hour increments. These rates will remain set for the duration of the season (school year or summer).

**ACH Payment Method is Required:** Please fill out the ACH Paperwork. Statements will be printed bi-weekly on Wednesdays, with the balance being pulled that following Monday.

\* During the school year ACH payments will be pulled on the 10th of the month.

### **Late Pick up Fees**

All children must be picked up by 6:00 p.m. Parents will be given a 5-minute grace period, with each minute thereafter a rate of \$1.00 per minute will be charged. The Watertown Police Department will be contacted if child/ren have not been picked up by 6:30 and attempts to contact parents and emergency contacts have not been successful.

### **Sign In and Out**

Each child must be clocked into the program upon their arrival and departure. In addition, the sign-out sheet must be signed by whoever picks up the child from KOT that day. Only persons listed on the registration form may pick up a child. If an unauthorized person attempts to pick up a child, the parent will be contacted immediately. If the parent can not be reached the persons on the emergency sheet will be notified. The child will be kept in KOT until a proper guardian arrives.

### **Absences**

All children who attend KOT are to be brought by a parent/guardian. We do not call parents/guardians if their child does not attend. If your child begins to walk or ride a bike to KOT staff **MUST BE NOTIFIED**. If your child/ren is coming to KOT on their own, then KOT staff will call parent/guardian if they do not arrive at KOT.

### **Policies for Sick Children**

All children who have any of the following symptoms will be sent home:

- fever of 99 degrees or more
- reddish or pink eyes, with or without drainage
- vomiting
- diarrhea

When a child becomes ill or shows any of the above signs, the parent/guardian will be contacted and asked to pick up the child.

### **Medication Policy**

Medication should be given at home when possible. Any medications to be given during the day **MUST** be authorized by a physician or a parent. Medication must be in the original container with the child's name on it and given to staff. Parents/guardians must fill out a Medication Authorization Form prior to staff giving medication to a child.

### **Accident Report**

If your child is injured at KOT, staff will fill out an Accident Report Form. One copy will be given to the parent/guardian, and one copy will be placed in the child's file.

### **Emergency Care**

In case of an emergency, serious accident, or illness, staff will contact the parent immediately. If parents or other designated persons cannot be reached. Staff will contact the hospital.

### **Snacks and Meals**

Snacks and meals must meet the nutritional requirements from the food pyramid guidelines, even meals provided by the parent/guardian. Snacks will be provided in the morning and afternoon. Children will need to bring a sack lunch and provide their own drink, napkins and eating utensils needed. Lunch needs to be packed in insulated coolers with ice packs. All food allergies need to be indicated on the registration form. Meals that require a microwave to be warmed up are only permitted on days your child/ren do NOT go to the pool.

### **Personal Items**

We ask that no personal property be brought from home.

### **Sharing Information**

KOT staff will share personal information with parents/guardians concerning their child's health, development and behavior.

### **Parent Involvement**

KOT uses Smore newsletter to provide parents general information and announcements via email. We ask that families provide a frequently used email address at registration to ensure that each family is getting appropriate updates and information from the KOT staff.

### **Publicity**

Immaculate Conception School would like to showcase special events and activities through our publications and social media accounts. By signing the Parent Agreement, you are permitting us to promote the exciting happenings at IC School in which your child participates.

If you do not consent to the use of photographs or videos, the office must receive written notification from the parents/guardian.

### **Changes at KOT**

If a significant change takes place at KOT parent/guardian will be notified either verbally or through written communications.

### **Emergency Procedures**

In the event of a weather emergency, the children will evacuate the room and go to a designated safe area.

### **Handling Storage of Hazardous Materials and The Disposal of Bio Contaminants**

Kids on Target at Immaculate Conception School require all staff to be trained in the area of Universal/Standard Precautions. Universal/Standard Precautions are guidelines issued to prevent disease transmission for people in all walks of life, including child care providers.

The Universal/Standard Precautions require persons to have a barrier between any infectious substance and the workers skin, eyes, nose, and mouth. The Kids on Target day care requires any care-provider employee, or substitute universal/standard precautions recommended by the Centers for Disease Control and Prevention (CDC) in handling any fluid that might contain blood or other body fluids. Universal/Standard precautions require treating all blood and fluids as possibly infectious.

### **Immunization Policy**

If your child is homeschooled, and/or not enrolled in school, immunization records are required for enrollment to KOT.

### **Recognizing Child Abuse and Neglect; Signs and Symptoms**

All Kids on Target staff are mandated reporters and are mandated to report any signs and/or symptoms that are reported or witnessed.

### **Evacuations**

Should it be necessary to evacuate Immaculate Conception school because of fire, the staff has been instructed in fire safety procedures for exiting the building. During severe storms, or if alerted by the civil defense regarding tornado warning, the children and staff will be gathered in the KOT locker room in the gym.

### **Bomb Threat**

In the event of a bomb threat at IC school, for your child's safety we will be evacuated to Immaculate Conception Church Parish Hall. We will remain there until the all-clear signal is given.

### **Summer Supplies/ Dress Attire**

Please make sure your child is dressed appropriately for the weather.

Tennis shoes are worn daily. **NO FLIP FLOPS**; sandals must have a strap in the back.

Each child needs to bring: a bottle of sunscreen, a blanket & pillow for quiet time, and a bottle of insect repellent.

On Pool Days: Each child needs to have a swimming pass or money for pool entrance. Each child needs to bring a swim bag, swimsuit, orange KOT swim shirt, and towel.

### **Termination of Services**

We reserve the right to terminate a child's enrollment at any given time if necessary.

KOT may terminate services for, but are not limited to, the following reasons:

- The lack of adherence to our policies, procedures, and code of conduct.
- The lack of cooperation from the parent/guardian with the program's efforts to resolve differences and/or meet the child's needs through parent/guardian-staff communications.
- Abusive behavior and/or verbal threats by parent/guardian or children toward the program staff or other parents/guardians or children.
- If balance is not kept current and there is no effort given to rectify the situation with the Business Manager.

## **Discipline Policy**

Staff will use the Boys Town discipline plan, which includes effective praise and teaches social skills. In addition, the KOT staff will use the levels of “Above the Line”, “At the Line”, and “Below the Line” to adequately assess incidents.

**Above the Line:** Students and staff will focus on Acts of Kindness to build positive behavior. Students will be acknowledged when Acts of Kindness are observed.

**At the Line:** Children will be given a yellow slip documenting behavior that was not the best choice. These slips will be sent home with the child the day they are given. Incidents warranting a yellow slip will be considered “small incidents” and will not affect child/ren’s enrollment in our KOT program.

**Below the Line:** Children will be given a red slip documenting large behavioral incidents or infractions of the KOT code of conduct. Red slips will require a parent/guardian signature and will need to be returned to KOT staff the following day. If a child receives three red slips over the course of the summer, the parent/guardian will be notified by the KOT Director that the child can no longer attend the Kids On Target program. There will be a formal letter typed and sent home to the parent/guardian documenting any “below the line” incidents. This letter will include the details of the incident, the discipline guidelines, and the KOT Code of Conduct. This letter must be signed, initialed, and dated by the parent/guardian and returned to the staff, along with the red slip, the following day. All forms will be copied and kept on file for the duration of the summer.

**Termination of Enrollment:** Children who receive three red slips over the duration of the season will be asked to leave our program. Parents/Guardians will be given one full calendar week from the date of the incident to make alternate plans.

**KIDS ON TARGET PROGRAM  
REGISTRATION FORM**

Immaculate Conception School  
109 3<sup>rd</sup> Street SE, Watertown, SD 57201

Phone: 605-886-3883 Website: <http://icschoolwatertown.org>

For Internal Use Only:

Date Received \_\_\_/\_\_\_/\_\_\_

Account # \_\_\_\_\_

Child's Name: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Male Female

School Child is attending \_\_\_\_\_

Child's Name: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Male Female

School Child is attending \_\_\_\_\_

Child's Name: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Male Female

School Child is attending \_\_\_\_\_

Child's Name: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Male Female

School Child is attending \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

**Father/Guardian's Name:** \_\_\_\_\_ email address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Home Phone \_\_\_\_\_

**Mother/Guardian's Name:** \_\_\_\_\_ email address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Home Phone \_\_\_\_\_

**Emergency Contacts:**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Persons authorized to check child out of KOT:** \_\_\_\_\_  
\_\_\_\_\_

**I confirm that I have read the Immaculate Conception KOT Handbook and agree to abide by the policies and procedures detailed within the handbook. This agreement applies to all family members enrolled in KOT.**

\_\_\_\_\_  
Mother/Legal Guardian                      Date                      Father/Legal Guardian                      Date

## Form A: Kids On Target Emergency Medical Care Authorization

Child(ren) Name(s): \_\_\_\_\_

I hereby give permission for emergency medical treatment, if requested by Kids On Target Staff, who is our childcare provider.

Please note that my child is allergic to the following medications and foods:

Child's Name and Allergy: \_\_\_\_\_

Child's Name and Allergy: \_\_\_\_\_

Child's Name and Allergy: \_\_\_\_\_

Child's Name and Allergy: \_\_\_\_\_

\_\_\_\_\_  
Mother/Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Legal Guardian

\_\_\_\_\_  
Date

## Form B: Kids On Target Information Sharing Policy

### **Records**

Parents who have child/ren attending Kids On Target have the right to inspect and review their child/ren's records; the right to seek to amend information in the records they believe to be inaccurate, misleading or an invasion of privacy; and the right to consent to the disclosure of personally identifiable information from their child/ren's records.

### **Information Release**

I understand that during the time my child is in the care of Kids On Target that the staff may be asked for information regarding my child. I hereby give permission to release information to official personnel only, who identify themselves, such as school, health care personnel, welfare or other governmental officials.

### **Publicity**

I give KOT the right to publish pictures of my child on the Immaculate Conception School Website, the KOT newsletter, and/or The Watertown Public Opinion or Bishop's Bulletin.

### **Medical**

Kids On Target has my permission to disclose information from my records if there is a health or safety emergency concerning my child.

*\*Kids On Target complies with the Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. 1232g; 34 CFR Part 99)*

\_\_\_\_\_  
Mother/Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Legal Guardian

\_\_\_\_\_  
Date



## Form C: Kids On Target Code of Conduct

The Kids On Target and Immaculate Conception School Staff are committed to ensuring children participate in an environment that is caring, respectful, and safe. Furthermore, children participating in the Kids On Target summer program will have the following rights and responsibilities:

### Student Rights:

1. Students have the right to participate in an environment that is physically safe from internal and external threats.
2. Students have the right to participate in a program free of harassment, intimidation, and bullying from peers or adults.
3. Students have the right to be respected by staff and peers.
4. Students have the right to expand their experiences and opportunities through our program of activities and events.
5. Students have the right to express their opinions in a responsible manner and to participate as appropriate for their age and maturity.
6. Students have the right to speak up for themselves and to be their own advocate.

### Student Responsibilities:

1. Students will be responsible for respecting Kids On Target property.
2. Students will be responsible for ensuring that safe conditions continue at Kids On Target.
3. Students will be responsible for their behavior and shall refrain from bullying others.
4. Students will be responsible for demonstrating respect for staff and peers through their use of appropriate language and avoiding profanity; racial and ethnic slurs; or any other inappropriate verbal and nonverbal language or communication.
5. Students will be responsible for working to their highest potential.

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

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Form D: Kids On Target Field Trip Permission Form

Child #1 \_\_\_\_\_

Child #2 \_\_\_\_\_

Child #3 \_\_\_\_\_

Child #4 \_\_\_\_\_

Kids on Target may schedule field trips, which will take child/ren on a fun educational experience away from the school.

I hereby consent to KOT staff taking my child/ren on field trips during the KOT program, and I hereby expressly relieve indemnify, save and hold harmless Kids On Target and Immaculate Conception School from and against any and all liability or claims arising from injury or damage to person or property or both caused by or resulting from child's acts, omissions, or conducts while on said trips. I also release any aforementioned personnel from any and all liability or claims arising from injury or damage suffered or incurred by said child as a result of the acts, omissions or conduct of any person, other than the negligence of said Kids On Target personnel.

It is further understood that we as parent/guardian shall have the responsibility of advising said child of the risks, which are known or should be known, of such trips. I further agree to assume the responsibility of seeing that my child cooperates and conforms to the fullest extent with the directions and instructions of the personnel in charge.

\_\_\_\_\_  
Mother/Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Legal Guardian

\_\_\_\_\_  
Date

## Form E: Kids On Target Movie Viewing Permission Form

Movies will be used on a limited basis during our KOT program; during inclement weather and as a special treat. Some of these movies are rated PG and we need parent permission for your child/ren to view these movies.

\_\_\_\_\_ **YES** my child/ren have my permission to view PG rated movies

\_\_\_\_\_ **NO** my child/ren may not view PG rated movies

\_\_\_\_\_  
Mother/Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Legal Guardian

\_\_\_\_\_  
Date

## Form F: KOT Commitment Agreement

Family Last Name: \_\_\_\_\_

Student Name: \_\_\_\_\_

Days Attending (circle all that apply): Monday      Tuesday      Wednesday      Thursday      Friday

Approx Time:      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_

Student Name: \_\_\_\_\_

Days Attending (circle all that apply): Monday      Tuesday      Wednesday      Thursday      Friday

Approx Time:      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_

Student Name: \_\_\_\_\_

Days Attending (circle all that apply): Monday      Tuesday      Wednesday      Thursday      Friday

Approx Time:      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_

Student Name: \_\_\_\_\_

Days Attending (circle all that apply): Monday      Tuesday      Wednesday      Thursday      Friday

Approx Time:      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_

Drop Off Only (drop offs must be schedule 48 hours in advance - subject to availability): \_\_\_\_\_

## Form G: KOT Pool Information

Purchase pool passes before summer KOT begins online at [www.watertownparkandrec.com](http://www.watertownparkandrec.com)

Indicate pool shirt size (youth) and how many: \_\_\_ XS \_\_\_ S \_\_\_ M \_\_\_ L \_\_\_ XL  
Cost will be added to your account - \$12 each.

### Swimming Safety Form - KOT Summer

*This slip MUST be on file before your child can go with KOT to the pool*

**Child #1's Name:** \_\_\_\_\_

\_\_\_ **YES**- my child has my permission to go down the black slide and go off the diving boards that enter the 10 ft depth.

\_\_\_ **NO**- my child does not have my permission to go down the black slide and go off the diving boards that enter the 10 ft depth.

**Child #2's Name:** \_\_\_\_\_

\_\_\_ **YES**- my child has my permission to go down the black slide and go off the diving boards that enter the 10 ft depth.

\_\_\_ **NO**- my child does not have my permission to go down the black slide and go off the diving boards that enter the 10 ft depth.

**Child #3's Name:** \_\_\_\_\_

\_\_\_ **YES**- my child has my permission to go down the black slide and go off the diving boards that enter the 10 ft depth.

\_\_\_ **NO**- my child does not have my permission to go down the black slide and go off the diving boards that enter the 10 ft depth.

**Child #4's Name:** \_\_\_\_\_

\_\_\_ **YES**- my child has my permission to go down the black slide and go off the diving boards that enter the 10 ft depth.

\_\_\_ **NO**- my child does not have my permission to go down the black slide and go off the diving boards that enter the 10 ft depth.

*\*I have read the WFAC Rules and Regulations included with my summer KOT Handbook.*

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