

**REGISTRATION INFORMATION**  
**2017-2018**

Welcome to the Gorton Children's Drop-In Learning Center. We are licensed by the State of Illinois and meet or exceed their standards in addition to providing a warm, caring and educational atmosphere for your children. **Please make your enrollment payment online at <http://www.gortoncenter.org>.**

State law requires actual signatures and paper copies of these forms and birth certificate copies to remain on file at the Center.

Please complete items 1-4 below and bring these documents to the Drop-In Center.

1. **Registration Form:**
  - Please complete the entire **Registration Form**.
  - Sign and date the **Verification of Receipt** section.
  - Sign and date at the bottom.
  
2. **DHS Certificate of Child Health Examination signed and dated by child's physician in two places. THIS FORM MUST BE DATED NO EARLIER THAN SIX MONTHS BEFORE THE BEGINNING DATE OF THE PROGRAM.**  
  
**Childhood Lead Risk Assessment Questionnaire signed and dated by child's physician. LEAD SCREENING IS REQUIRED FOR ALL CHILDREN SIX MONTHS AND OLDER WITH A PHYSICIAN'S SIGNATURE. A TB TEST IS ALSO REQUIRED FOR ALL CHILDREN ONE YEAR OLD AND OVER. IF YOUR CHILD'S PHYSICIAN ELECTS NOT TO ADMINISTER A LEAD TEST OR A TB TEST, WE MUST HAVE A NOTE ON FILE.**
  
3. Photocopy of child's birth certificate – as required by DCFS.
  
4. **Standard Registration fee** – Early enrollment is from April 8, 2017-August 3, 2017 Early enrollment is \$175.00 for one child and \$230.00 for two or more children. After August 3, 2017 it is \$205 for a family enrolling one child. \$260 for families enrolling two or more children. If you register online, you can pay with MasterCard or VISA online, or bring a check or cash with your registration forms in person. If you do not register online, you must bring a check or cash with your registration forms. Please make checks payable to: Gorton Children's Drop-In Center. Registration fees are non-refundable.
  
5. **"Plan B" registration fee** – We are now offering an alternative registration fee for families who only need to use the DILC sporadically when their primary caregiver is unable to care for them. This registration fee is \$50.00 for one child, \$75.00 for two or more children. You will be allowed to use the DILC for a total of 10 reservations per school year if you chose this option. If more than 10 reservations are used the standard registration fee will be charged. The hourly rate applies to the 10 reservations. Registration fees are non-refundable.

Thank you for your cooperation in completing the necessary information. **ONLY COMPLETE FILES CAN BE ACCEPTED.** Please see the Parent Handbook to familiarize you with our Center. If you have any questions, please contact us at 847-234-2778.

You may email your reservations as early as 12:00 a.m., **two weeks in advance of the date requested** online at <http://www.gortoncenter.org/drop-in/reserve>, or emailed to [dicdirector@gortoncenter.org](mailto:dicdirector@gortoncenter.org).

**Registration for 2017-2018**

Last Name \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_

Address: \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mother Cell: \_\_\_\_\_ Father Cell: \_\_\_\_\_

Mother's or Father's Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Children: Name: \_\_\_\_\_ DOB \_\_\_\_\_

Gender: Male Female

Name: \_\_\_\_\_ DOB \_\_\_\_\_

Gender: Male Female

Name: \_\_\_\_\_ DOB \_\_\_\_\_

Gender: Male Female

**EMERGENCY CONTACTS:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

**MEDICAL INFORMATION:**

Physician:

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

Phone#: \_\_\_\_\_

Dentist:

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

Phone#: \_\_\_\_\_

Please provide any additional information that might help us better care for your child (ex; what provides comfort: particular fears or behaviors we should be aware of: circumstances such as adoption or child custody agreements.)

\_\_\_\_\_  
\_\_\_\_\_

Allergies/ Medical Problems:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY AND MEDICAL PROCEDURES:**

I have been informed of and agree to the following emergency and medical procedures:

1. In cases of illness, I will be called and required to pick up my child as soon as possible. If I cannot be reached, the Center will contact the emergency contacts I provided. I agree to provide at least **2 contacts**. (initial\_\_\_\_)
2. In cases of simple injury (such as abrasion, skinned knee, splinters etc.), I understand the Center staff will perform routine hygienic procedures, such as washing wounds and applying bandages. I understand further, the Center staff will perform basic first aid procedures if the situation warrants such action. (initial\_\_\_\_)
3. In cases requiring the attention of a physician (such as need for stitches or x-rays), I understand I will be called. If I or the emergency contacts cannot be reached, I request and give my permission for my child’s doctor to be called and for that doctor to render any necessary treatment. I agree to assume financial responsibility for the doctor’s care. (initial\_\_\_\_)
4. In cases of medical emergency, I will be called immediately. If circumstances require, the

paramedics will be called. The Center's staff will respond as necessary until the paramedics arrive. In the event that hospitalization is required, I give my consent for my child to be taken to Northwestern Lake Forest Hospital. I give my consent for treatment by a qualified physician at Northwestern Lake Forest Hospital. I agree to assume all financial responsibility for such treatment. (initial\_\_\_\_)

5. I agree to leave a telephone number where I or an emergency contact can be reached upon each visit to the Center. (initial\_\_\_\_)
6. To the best of my knowledge, my child has no condition, which restricts his/her full participation in the Center program. If, in the future, such restrictions should become necessary, I will inform the Center staff in writing of those restrictions. (initial\_\_\_\_)
7. I understand that if the Center deems it appropriate for my child to have an aide, I the parent will provide the aide. I agree to assume all financial responsibility for said aide. (initial\_\_\_\_)
8. All children enrolled at the Gorton Children's Drop-In Center must be up to date on the state recommended immunizations. See section 14 in the parent handbook for schedule. (initial\_\_\_\_)

**CANCELLATION AND SHORT NOTICE POLICY:**

***Any cancellation with less than 24 hours notice will result in a charge for the time reserved.*** If there is a wait list, we will make every effort to fill the space. Cancellations made on a weekend day will be considered less than 24 hours notice. To avoid cancellation fees, you must call 24 hours prior to the start time of your reservation time.

For example: If your reservation is for Wednesday, 9 a.m. - Noon, you must call by 9 a.m. the previous day (Tuesday). If your reservation is for Monday 9 a.m.-Noon, you must call by the previous Friday at 9 a.m.

**Each child is allotted 3 sick days.**

**PHOTO/VIDEO PERMISSION:**

Yes I give my permission for my child(ren) to be photo/video graphed at the Center for the purpose of display at the Center or on the Gorton Community Center website. I understand that I would be contacted for my permission before a photograph would be released for the purpose of publicity outside the Center or Gorton Community Center website.

No I do not give my permission for my child(ren) to be photo/video graphed at the Center.

**EMAIL CONSENT:**

The Center is making every effort to communicate via email in an effort to keep our expenses to a minimum, and our fees as affordable as possible.

I understand that by providing the email address below, I am giving consent to receive billing statements, newsletters, notices, and announcements sent by the Center.

Email address: \_\_\_\_\_

Email address: \_\_\_\_\_

Gorton Children's Drop-In Center  
Drop-Off and Pick-Up Policy

**I agree to drop-off and pick up my child at the time I designated** on my child's reservation at the Gorton Children's Drop-In Center (DIC).

If I drop my child before the reserved time, I agree to pay \$4.00 for every 5 minutes I am early.

If I pick up my child late, I agree to pay \$4.00 for every 5 minutes I am late.

If I have not contacted the Gorton Children's Drop-In Center (DIC) to notify them I am late within 10 minutes of the time I have reserved, the DIC will call the emergency number I provided on the sign-in sheet. If I cannot be reached immediately, the DIC will call the Emergency Contacts listed in my child's file.

*If my child's emergency contacts cannot be reached or are unavailable to pick up my child, the DIC is required by DCFS regulations to notify the local law enforcement officials and DCFS.*

Signed \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_ Parent of \_\_\_\_\_  
understand that I am responsible for having my child's hearing and vision tested at age 3, as  
indicated by DCFS regulations.

Signed

\_\_\_\_\_ Date: \_\_\_\_\_

—

**VERIFICATION OF RECEIPT:**

CFS 581

Rev. 12/2000

State of Illinois  
Illinois Department of Children and Family Services

**VERIFICATION OF RECEIPT**

I/WE,

\_\_\_\_\_

Please Print Name(s)

parent(s) of \_\_\_\_\_, hereby certify that  
I/we have

Name(s) of Child(ren)

received a copy of a summary of licensing standards printed by the Illinois Department of Children and Family Services.

\_\_\_\_\_  
Signature of Parent Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent Date \_\_\_\_\_

**Note: the summary of licensing standards printed by the Illinois Department of Children and Family Services is attached at the end of this document.**

I AGREE TO COOPERATE WITH THE RULES AND REGULATIONS OF THE GORTON CHILDREN'S DROP-IN CENTER REGARDING FEES, CANCELLATION POLICY, ILLNESS, IMMUNIZATION UPDATES, CLOTHING AND OTHER ITEMS SPECIFIED IN THE PARENT HANDBOOK. I UNDERSTAND THAT I WILL BE CHARGED \$25 PLUS BANK FEES FOR ANY CHECKS THAT ARE RETURNED.

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Parent Handbook**

**I have read and received a copy of the Gorton Children's Drop-In Center Parent Handbook:**

**Signed:** \_\_\_\_\_ **Date** \_\_\_\_\_

**ATTACH PHOTOCOPY(IES) OF  
CHILD(REN)'S BIRTH CERTIFICATE(S) HERE  
(AS REQUIRED BY DCFS)**



**GORTON  
CHILDREN'S  
DROP-IN CENTER  
400 E. ILLINOIS RD.  
LAKE FOREST, IL 60045  
847-234-2778**

**PARENT HANDBOOK**

1. Purpose
2. Goals
3. Location
4. Operating Hours
5. Enrollment and Fees
6. Payment
7. Reservations
8. Cancellations
9. Arrival and Pick-up
10. Non-Parent Pick-up
11. Snack /Lunch
12. Child/Teacher Ratios .
13. Health Information
14. Immunization Schedule
15. Illness
16. First Aid/Medical Emergencies
17. Daily Programs
18. Program Participation/Behavior Management
19. Items to Bring to Center
20. Appropriate Dress
21. Toys from Home
22. Standing Reservations
23. Pest Control

**1. PURPOSE** - The Gorton Children’s Drop-In Center is a non-profit child care program serving children from six weeks through five years of age. The purpose of the Drop-In Center is to provide flexible quality care for parents needing time to work at home or part time, volunteer in the community, make an appointment, attend a meeting, spend time alone with another child, or shop without kids!

**2. GOALS**

The Drop-In Center is proud to have goals that provide your child with:

- An atmosphere that promotes physical, emotional, intellectual, creative, and social growth.
- An environment that is safe and nurturing.
- A program that recognizes each child as a unique individual.
- Positive encouragement for the child’s continued growth.
- Opportunities for the child to learn by doing.
- An environment that encourages children’s creativity.
- Encouragement for social development, sharing, taking turns, problem solving, making friends, respecting others.

All children have the right to be treated with dignity and respect, and the Gorton Children’s Drop-In Center will maintain an environment free of racial or gender bias, stereotype, or prejudice. The Drop-In Center provides its staff with the opportunities to increase and further their knowledge of early childhood development through the enrollment in workshops and conferences offered throughout the year.

The Gorton Children’s Drop-In Center, established in 1986, is licensed by the Illinois Department of Children and Family Services, and complies with all of its standards.

**3. LOCATION** - The Gorton Children’s Drop-In Center is located in Gorton Community Center, 400 East Illinois Road, Lake Forest, Illinois, 60045. The phone number for Gorton Community Center is 847-234-6060.

**4. OPERATING DAYS AND HOURS – August 28, 2017-June 1, 2018**

- The Center is open from 8:30 a.m.-4:00 p.m., Monday through Friday.
- Our calendar is based on District 67’s school calendar. There are a number of days that the Center will be closed due to conferences and workshops that the staff will attend. Please note there will be days we are closed for Holidays and breaks as well.
- If School District 67 is closed due to snow, we will be closed also. You can hear the school closings on WMAQ or WBBM 780 AM radio or district 67’s website.
- Calendars will be available at Drop-In, information will be emailed as to when to call for reservations over a holiday.

**5. ENROLLMENT AND FEES** - The annual enrollment fee for a family enrolling one child is \$205. The fee for a family enrolling two or more children is \$260. Enrollment fees are non-refundable. The hourly fees are based on the number of children attending:

One child	\$10 per hour
Two children	\$15 per hour
Three children	\$20 per hour
Lunch	\$3.00

An additional daily fee of \$5 will be charged for last minute reservations made after 4:00p.m. on the previous day or day of.

The Center will charge \$4 for every 5 minutes of tardiness.

**6. PAYMENT** - We prefer that you make a payment before your reservation. The Center requires that payments be made within 24 hours of receiving your bill. Notices for payments that are owed will be emailed to the email address you provided. If you prefer, we can also provide you a paper copy of your bill.

Alternative payment plans for families with standing reservations are available. Please see Drop-In Center director for arrangements to be billed monthly. There is a limited number of standing reservations available.

Payments can be turned into the payment box at the DILC reception desk or paid via credit card on the payment page of the Gorton Drop-In Center.

**NEW: There is a 5% charge for all unpaid balances that are 10 business days past due.**

Please note that a \$25 charge plus bank fees will be charged for all returned checks. If you are unable to pay your account in full, the Drop-In Center will do it's best to work out a payment plan with your family.

\*Drop-In Center reserves the right to suspend usage if payment conditions are not met.

**7. RESERVATIONS** - Reservations can be made up to two weeks in advance *starting at 12 a.m.* by emailing [dicedirector@gortoncenter.org](mailto:dicedirector@gortoncenter.org), or by completing a reservation request online. In order to limit the number of transition periods, reservations are limited to the hour and half hour only.

If you have not heard back from us within 24 hours, please call 847-234-2778.

We no longer have a receptionist. Therefore, return calls may not be made until later in the day.

**If your child is presently being cared for at Drop-In  
and you have an emergency message,  
you may call our emergency line at 847-234-6060.**

**8. CANCELLATIONS** - Any cancellation with less than 24 hours notice will result in a charge for the time reserved. If there is a wait list, we will make every effort to fill the space. You are entitled to 3 sick days per year, at no charge.

**9. ARRIVAL AND PICK-UP** - *Upon arrival, please confirm that the time we have your child scheduled is correct.* You **must** sign your child in at their classroom and leave any information about where you can be reached in case of emergency.

If you drop off your child late or pick him or her up early, please remember to pay the full amount for the time you reserved.

**When picking up, please allow enough time to pay and sign out before collecting your child. This way we can ensure proper supervision of your child while you are occupied.**

**PLEASE CALL THE CENTER IF YOU WILL BE LATE PICKING UP YOUR CHILD.**

Remember that someone else may be waiting to drop off a child and state law limits the number of children who may be cared for at the Center at any given time.

**We reserve the right to suspend use of the Drop-In Center to anyone who is chronically tardy.**

10. **NON-PARENT PICK-UP** - If another adult will be picking up your child, please make certain you have filled out the necessary release forms. *Under no circumstances will a child be released to anyone without authorization from the child's parents.* **DO NOT BE ALARMED WHEN WE ASK FOR PROOF OF IDENTIFICATION.** Your child's safety is our utmost concern. **Individuals picking up children at our center must be at least 18 years old per DCFS law.**

11. **SNACK and Lunch** \*\*\* We are a NUT-FREE environment \*\*\*

**The Gorton Children's Drop-In Center serves lunch to children over 15 months.**

**All children in the Center during lunchtime, (12:00-1:00), will be served a lunch from a DCFS approved catering company.**

Children will not be able to bring in their own food unless they have a medical condition and written authorization from their pediatrician.

Snack times are scheduled for mid-morning and mid-afternoon. We provide water and a snack.

Children under 15 months must bring food, snacks, bottles, etc. **All are to be clearly labeled with the child's name**

12. **CHILD/TEACHER RATIOS**

Infants (6 weeks-15 months)	4:1
Toddlers (15-24 months)	5:1
2-3 year-olds	8:1
3-5 year-olds	10:1

13. **HEALTH INFORMATION** - The Center will accept only those children whose updated medical forms are on file. Medical forms are valid for two years and must be completed by a physician. Please remember to bring in verification every time your child receives immunizations. State law requires that all medical forms must be up-to-date. ***Lead screening and TB test results must be provided for all children.*** DCFS now requires a copy of a birth certificate for each child to prove the child's identity.

#### 14. **IMMUNIZATION SCHEDULE** -

<b><u>Age</u></b>	<b><u>Immunization</u></b>	
Birth	Hepatitis B	<i>Dose 1 of 3</i>
2 months	Hepatitis B	<i>Dose 2 of 3</i>
	DTaP	<i>Dose 1 of 5</i>
	Hib	<i>Dose 1 of 4</i>
	IPV	<i>Dose 1 of 4</i>
	PCV	<i>Dose 1 of 4</i>
4 months	DTaP	<i>Dose 2 of 5</i>
	Hib	<i>Dose 2 of 4</i>
	IPV	<i>Dose 2 of 4</i>
	PCV	<i>Dose 2 of 4</i>
6 months	DTaP	<i>Dose 3 of 5</i>
	Hib	<i>Dose 3 of 4</i>
	PCV	<i>Dose 3 of 4</i>
6-18 months	Hepatitis B	<i>Dose 3 of 3</i>
	IPV	<i>Dose 3 of 4</i>
12 months	TB test	
12-15 months	Hib	<i>Dose 4 of 4</i>
	MMR	<i>Dose 1 of 2</i>
	PCV	<i>Dose 4 of 4</i>
12-18 months	Varicella	<i>Dose 1 of 1</i>
15-18 months	DTaP	<i>Dose 4 of 5</i>
4-6 years	DTaP	<i>Dose 5 of 5</i>
	IPV	<i>Dose 4 of 4</i>
	MMR	<i>Dose 2 of 2</i>
(NEW) 2, 4, & 6 months	ROTA	<i>Series of 3 doses</i>

**15. ILLNESS** - As required by state law, each child will be given a visual health check upon arrival. All children must have their hands washed upon entering the Center. A child who exhibits any signs of illness will not be able to stay at the Center. If a child becomes ill during his/her stay, a parent or emergency contact will be required to pick him/her up immediately. The child will be isolated and given proper care until an authorized adult arrives. It is essential to your child's safety to leave a telephone number of where you can be reached.

#### **Please keep your child home if he/she:**

- is unable to participate comfortably in program activities, this includes outside activities.
- has a persistent cough
- has any of the following conditions: fever, sore throat, lethargy, irritability, persistent crying, or other signs of possible severe illness
- has diarrhea (defined as an increased number of stools compared with the child's normal pattern, with increased water and/or decreased form)
- has vomited in the previous 24 hours
- has a fever or has had one during the previous 24 hours (temperature should be normal for 24 hours)
- has had a cold for less than 4 days

- has been taking antibiotics for less than 24 hours

**16. FIRST AID/MEDICAL PROCEDURES** - In the event of an injury, the staff will administer first aid to the child. If the injury requires medical attention, we will attempt to contact a parent immediately. If a parent cannot be reached, we will contact the emergency numbers. In the case of an emergency, the staff will call an ambulance to transport the child to Lake Forest Hospital.

Every effort will be made to contact the child's own physician. It is important that you keep the Center up-to-date on phone numbers, emergency numbers, and other pertinent information.

**17. DAILY PROGRAM** - The Drop-In Center provides a daily curriculum including:

- Indoor free play with developmentally appropriate toys
- Small group and large group activities
- Creative art projects
- Outdoor play, weather permitting
- Snack
- Language activities
- Music (instruments and songs)
- Gross motor activities

**18. PROGRAM PARTICIPATION/BEHAVIOR MANAGEMENT**

We encourage children to:

- Help pick up after themselves
- Respect property of the Center
- Respect others
- Share (when appropriate)
- Wash hands upon entering the Center, again before eating, and after using the bathroom
- Problem-solve
- Be tolerant and accepting of others

Acceptable behavior is encouraged and nurtured through positive reinforcement and modeling by the staff. Should a child show inappropriate behavior, that child will be redirected and the matter discussed.

If these techniques have been exhausted, and the child is in danger of hurting himself or others, removal from the group may be necessary. After the child has had time to regain self control, he or she may once again participate in the activities.

Time out shall not be used for children less than 24 months of age.

**If a child inflicts injury on another child resulting in medical treatment, the child will need to be picked up by the parent or approved caretaker and the matter discussed with the child's teacher and/or director.**

**State licensing requires the following policy:**

**"Any child who, after attempts have been made to meet the child's individual needs, demonstrates inability to benefit from the type of care offered by the facility, or whose presence is detrimental to the group, shall be discharged from the facility."**

## **19. ITEMS TO BRING TO THE CENTER**

- Well-labeled bag
- **Complete set of extra clothing**
- Outdoor clothing (boots & snow pants in winter)

### Infants and Toddlers

- Diapers
- Wipes
- Bottles
- Bibs
- Security items for naps (blankets, etc.)
- Finger foods (under 15 months)

**Please be sure to label all items.** Children have difficulty identifying their own belongings if there are several from which to choose.

## **20. APPROPRIATE DRESS – Dress for MESS!**

The Center encourages parents to send their child dressed for active play. *We suggest comfortable clothes, free of complicated fastenings.* Our daily schedule does include potentially messy art projects and outdoor play.

Please send your child with shoes that are appropriate for indoor and outdoor play. The children will be climbing, running, and riding toys. The Drop-In Center does not allow children to walk around in stocking feet.

In the winter months, please send well-labeled, warm winter clothing. The children over 2 years old may play outdoors if the wind chill temperature is above 25 degrees.

**21. TOYS FROM HOME** – are not permitted. Toys may get lost, mixed in with Drop-In toys, or create problems for other children. A soft toy or blanket that is necessary for the children’s comfort is permitted.

**22. Standing Reservations**- The Drop-In Center welcomes “standing reservations”. A Standing Reservation” is a reservation lasting longer than 2 months, and is scheduled for the same period of time on the same days from a starting date to an ending date. These can be made at the Center or by email. There is a maximum of 5 infant/toddler standing reservations per day, 10 standing reservations per day in the 2s room, and 15 standing reservations per day in the pre-k room.

**23. Pest Control**- Pest Management- Our Pest Control Management Service is ARC. The parents are notified 1 week prior to any applications. Pest control is done on an as needed basis. City of Lake Forest notifies GCDIC when they will be treating the surrounding areas (grassy).