



# Hudson Country Montessori School

340 Quaker Ridge Road  
New Rochelle, N.Y. 10804  
(914) 636-6202/Fax (914) 636-5139

## POLICY STATEMENT

The Hudson Country Montessori School and Day Camp is open to all children regardless of race, creed or ethnic origin.

For a child to be admitted to the School/Camp the parents must complete and sign the forms presented by the School/Camp including 1) the application form, 2) the enrollment and tuition agreement, 3) the health form (which must be signed by a physician), 4) the medical emergency and release form and 5) this policy statement.

No child will be admitted to the School/Camp without all of the above forms, which are required by law.

The children are given a routine health check each day upon arrival. Any child who shows symptoms of being ill and/or infectious will not be admitted to the School/Camp.

The School/Camp opens at 7:30 am and closes at 6:00 pm (Monday through Friday). If a child is not picked up by 6:00 pm and we are unable to reach the parents, the School/Camp will attempt to contact the Emergency/Release contacts. The child will be held at the School/Camp until contact is made. **If contact is not made by 8 pm (or within 2 hours of earlier closing), the police will be notified.** There is a 15 minute grace period for early arrivals and a 5 minute grace period for late pick-ups. If you arrive earlier or later than your scheduled times, you will be charged for the additional service at a rate of \$1 per minute. Pick-up time is the time the child is picked-up from his/her classroom/group not the time the parent entered the building.

During the school year, the three year olds entering the primary program are expected to be toilet trained. Children, who have not made a complete transition, will be billed at the toddler tuition rate until independent in this area.

All school/camp snacks and catered lunch are approved by a nutritionist. The child who attends a full day at the School/Camp (and brings his/her own lunch) will be required to bring a nutritious lunch.

Children attending the half day program (without lunch) will receive one nutritious snack.

Children who require any kind of special diet must bring written, signed instructions indicating all restrictions. The parent must provide the appropriate food for the child.

The School/Camp may not administer medication of any kind to the students with the exception of the Epi Pen. The Epi Pen may only be administered with the appropriate completed forms. In addition, a student can self-administer medication with the proper documentation. All forms are available at the School office.

Pictures and video recordings of the children will be taken periodically for internal and publicity purposes during the school year. **Parents may elect to have their children excluded from pictures used for publicity purposes by submitting their request to the office in writing.** Parents may not request that their child be excluded from pictures taken for internal purposes. Pictures taken for internal purposes may be used for student art projects, posted on lockers and coat hooks to help children in independence, school security, posted on hallway picture boards, and other uses that the School deems are in the best interest of the child, parent or School. Because the children engage in many interesting activities, pictures may also be used for unpaid publication in local newspapers.

For the school year, the School will create a class list with the child's name, address, home phone number and parent's names and e-mail addresses which will be distributed only to the School administration, teachers and parents of other students in the child's class to facilitate carpooling and other student related activities.

Parent involvement during the school year is encouraged and welcomed. Parents are invited to observe their child(ren) at the School at any time and may call the school office to make arrangements. All other visitors must make an appointment with the approval of the Director.

I have carefully read this Policy Statement, and in full understanding of this policy, hereby accept its terms as stated.

\_\_\_\_\_  
Name of Child

\_\_\_\_\_  
Signature of Parent/Guardian

Revised 8/01/18

\_\_\_\_\_  
Date