Before & After School Care 2026-2027: Rate Sheet and Options

Before School (Charges start at 7:00 AM & ends at 8:00 AM):
$4.00/day per morning per child

A.M. Half Day (Charges start at 8:01 AM & ends at 11:00 AM):
$10/day per child

P.M. Half Day (Charges start at 11:01 AM & ends at 2:45 PM):
$10/day per child

After School (Charges start at 2:46 PM & ends at 5:30 PM):
$11/day per afternoon per child

Full Day:
$35.00/day per child

Please select all options needed below and return so that we can staff appropriately based on your needs:

Child's Name: _____

My child will attend:

___ Before School Only Days: M T W TH F (please circle all that apply)

___ After School Only Days: M T W TH F (please circle all that apply)

___ Both Before and After Care Days: M T W TH F (please circle all that apply)

___ School Delays

___ Half Day & Full Day School Closings

Parent Signature: _____ Date: _____

Woodland Early Life Learning Center

Application for Enrollment

Student Information:

Student Name: _____
Last First Middle Name Preference

Gender: Male Female Birthday: ___ /___/_____ Social Security #: _____-_____-_____

Address: _____

Home Phone #: _____ Alternate #: _____

Student Emergency Information:

Food Allergies: _____

Medicine Allergies: _____

Other Allergies: _____

Child's Physician: _____ Phone #: _____

Parent/ Guardian Information:

Father's Name: _____ Cell Phone #: _____

Father's Employer: _____ Work Phone #:_____
Father's Email: _____

Mother's Name: _____ Cell Phone #: _____

Mother's Employer: _____ Work Phone #: _____
Mother's Email: _____

Legal Guardian: _____ Cell Phone #: _____

Guardian Employer: _____ Work Phone #: _____
Guardian's Email: _____

Authorized Pick- Up Persons:

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Non-Authorized Pick-Up Persons:

Name: _____

Name: _____

Other Children:

Name:	Age:	Grade:	School Attending:
_____	___	_____	_____
_____	___	_____	_____
_____	___	_____	_____

Additional Information:

_____

_____

_____

_____

_____

Persons to be called in case of emergency, if parents cannot be reached:

1 Name: _____ Phone #: _____

2 Name: _____ Phone #: _____

Agreements:

- The WELL Center agrees to notify the parent/guardian whenever the child is ill. The Parent agrees to have the child picked up as soon as possible, if required.
- The parent/guardian authorizes the WELL Center to obtain immediate medical care if any emergency occurs when the parent/guardian cannot be reached.
- The parent understands that payment of tuition occurs monthly and that the WELL Center utilizes the services of Procare for the collection of tuition and fees. Parent/guardian agrees to complete Procare agreement and select payment options as outlined. If payment is not received, the contract for services to the child may be terminated and late fees may be applied..
- I understand that it is my responsibility to sign my child in upon arrival and sign my child out before leaving. The WELL Center will NOT release minors to minors. The person picking up and signing children in/out **must** be at least 18 years of age.
- I understand that my child will not be allowed to leave the facility with an unauthorized person. Any person authorized to pick up my child **must** be listed. Authorization by telephone will not be accepted. If someone that is not listed as an authorized person is to pick up my child, I will submit a written and signed request to the Director prior to the date of pick-up. A picture ID is required
- The parent agrees that a fee of one (1) dollar per minute may be charged for picking up the child after WELL Center closing time.
- Parents are requested to bring all questions and concerns to the teachers and Director so that they may be resolved.
- The teachers and Director are hereby given full discretion in matters of discipline. These include notes to the parents, conferences, redirection, positive reinforcement and/or time out.
- The Well Center reserves the right to dismiss any student who does not cooperate with the educational process or one whose parent does not abide by this Agreement.
- I have read and understand the entirety of the student handbook and all questions I have regarding WELL Center procedure and policies have been answered at this time.
- The WELL Center will not accept applications for students with an outstanding balance on their account.

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Signature of Parent/Guardian: _____ Date: _____

Printed Name: _____

Signature of Director: _____ Date: _____

Printed Name: **Heather E. L. McGann**

Woodland Early Life Learning Center

Parent Guide

2026-2027

Woodland Baptist Church
4434 Thomas Nelson Highway
Arrington, VA 22922
434-263-6811
www.woodlandchurch.org

Dear Parents,

Let us take this opportunity to welcome you to the Woodland Early Life Learning Center. We consider it a privilege to provide early Christian education for these children. Our Center is an educational ministry under the direction of Woodland Baptist Church and the WELL Committee. In compliance with the Code of Virginia, this Center is exempt from licensing and is classified as an “exempt” child care center.

Please take a few moments to read over this guidebook outlining policies and procedures of the Center. In order to give the best education and care to your child, certain policies and procedures must be followed. If you have any questions concerning your guidebook, please feel free to contact the WELL Committee.

The WELL Committee

Mission Statement

The purpose of this ministry

Is to provide

Eighteen months to five-year-old children

With an excellent learning environment

In an atmosphere of consistent, affectionate care,

And

To promote growth in all aspects of each child's

Spiritual, emotional, intellectual, social,

And physical development.

Policies and Procedures

WELL Committee

The Woodland Early Life Learning Center (WELL Center) is an educational ministry under the supervision of the WELL Committee. The members of the committee are elected by the membership of Woodland Baptist Church and are responsible for all policy decisions.

Program Personnel

The staff members of the WELL Center are required to be professing Christians and are encouraged to be active in a local congregation. Teachers are required to have knowledge and experience in early childhood education.

Program Objectives

A. To help each child adjust to his or her environment.
B. To aid the child in learning to understand and live intelligently in God's world.
C. To provide a daily routine to teach the children to be responsible.
D. To facilitate social, emotional, spiritual, and intellectual growth while providing the child freedom of movement and appropriate equipment in an environment of Christian love and concern.
E. To encourage each child to be creative.
F. To help each child find a comfortable, contributing place in the group.
G. To develop an awareness of safety and health precautions in each child.
H. To encourage communication between parents and WELL Center staff.

Tuition and Fees

A. Payment for your child's tuition must be paid monthly through Procare. If your child is enrolled part-time time the WELL Center will bill you accordingly. Parents will receive information upon enrollment and re-enrollment regarding payment instructions and options.
B. A $25.00 non-refundable registration fee must accompany the initial application form.
C. A materials fee of $55 must be paid upon enrollment and re-enrollment each year. This fee is in addition to the registration fee and is not refundable or pro-rated.
D. An activity fee of $55 must be paid upon enrollment and re-enrollment each year. This fee covers the once-a-month "Special Lunch" and the year-end Fun-day. This fee is in addition to the registration and material fee and is not refundable or prorated.
E. Make-up Days are only good for the month of the missed date. Make-up Days for part-time students are based on availability and ratio. We cannot guarantee make-up days. Parents should discuss any missed time with their child's teacher as soon as possible, to try to have these days worked into the teacher's schedule.

F. The Center reserves the right to close for excess illness, should they become unable to meet state requirements (including ratio) due to widespread illness, or if deep cleaning to reset the center is required to help prevent/control further spread of the virus. Closure days for excessive illness are not typically credited by the center, as these measures are often related to providing appropriate/quality childcare to all students and are necessary for the health and safety of the center as a whole.

G. End-of-year Childcare Tax Receipts are available in your ProCare App. Follow these simple steps to access the information needed to add your childcare expenses to your tax return:

1. Open the ProCare App from your phone OR Go to procaresoftware.com
2. Log in to your existing ProCare Account
3. From your Home Screen, click on the menu button (usually denoted by 3 stacked lines) in the upper left-hand corner.
4. Click the "View Transactions" option on the drop-down menu
5. At the top of the page, there will be 2 blue hyperlink labels ("Statement" and "Tax Statement")
6. Click on the link labeled "Tax Statement."
7. In the pop-up menu, choose the "select year" box
8. From the drop-down box, choose the appropriate year for the taxes you are filing
9. Click "Send Email" (this will send a printable copy to your associated email on the account)
10. Open the email and click on the attachment to download and print your current year's tax return
11. The EIN for The WELL Center is: 54-0654432 and can be found at the top of your printed form

Inclement Weather

In case of inclement weather (or other unforeseen circumstances) and the WELL Center is unable to open, parents will be charged for no more than four days per calendar year (July 1 – June 30). Any additional days closed due to inclement weather will be tuition-free and parents will be reimbursed accordingly. In the event of inclement weather, a Procare message will be sent, or parents can contact the WELL Center at 434-263-6811. If at all possible, the WELL Center will be open; However, the safety of our students and staff is a priority and will be taken into account when deciding to close.

Withdrawals

Any child who withdraws or is dismissed from the Center must reapply and be accepted for re-admission. ($25 Registration Fee must be paid at the time of re-registration)

Physical Examination and Immunization Certification

Each child is required to have a physician's check-up within twelve months prior to admission into the program. If your child has not been provided with standard immunizations according to their age, parents will be asked to sign and have notarized the "Religious Exemption for Vaccines Form" required on file by VDOE/VDSS.

Calendar

The WELL Center typically is open from 7:00am until 5:30pm Monday – Friday, except announced holidays and the week of July 4th.

This fiscal year the WELL Center will be closed **June 29th- July 3rd, 2026**

Other Annual holidays include:

New Year's Day, Memorial Day, Labor Day, Thanksgiving Day and the Friday after. **The WELL Center will be closed for Easter Weekend this year, 2026. Easter closure dates will be Friday, April 3rd, and Monday April 6th, 2026. THIS YEAR'S CHRISTMAS CLOSURE WILL SPAN FROM December 21st - December 25th, 2026, as well as January 1st.**

When these holidays fall on the weekend, a Monday or Friday will be observed.

Records

Records kept by the WELL Center are as follows:

- Daily attendance
- Copy of Birth Certificate
- Health reports
- Accident reports
- Medication forms
- Authorization for emergency medical care
- Name and telephone number of the child's doctor
- Telephone number where parents can be reached at home and work
- Telephone number of an emergency contact person if parents cannot be located

Parents must notify the Center if there is a change in any of this information.

A medication form must be filled out by a parent or guardian, giving permission to the staff to dispense all medication. All medication must be in the original container and labeled with the child's name and dosage. Medication will not be given for more than 10 consecutive business days without written certification from a doctor.

Sick Children

Children with a fever over 100 degrees will not be allowed to stay at school and must be fever-free, without the aid of medication, for at least 24 consecutive hours before coming back to school. Any child with two instances of either vomiting, diarrhea or with any contagious disease will also not be allowed to stay at school. The child may not return to school the day following said incident of fever, vomiting, diarrhea. Parents are responsible for arranging for the child to be picked up if the teacher tells them the child is sick. The teacher may require a note from the doctor that the child has recovered in order to return.

Additionally, for full-time siblings who attend the WELL Center, should one child be out of the center for illness, the other child will also be asked to remain home. Reimbursement for the full-time student, who is not ill, will be credited to the parent's account for up to 2 days without a doctor's note. If

parent's wish to be reimbursed for their well child beyond the 2-day mark, a doctor's note with a return date for the ill child must be provided to the director.

Example: (1) If Sally has a fever at 7am on Monday and her fever resolves by 9am without medication, Sally (nor her sibling) may not return to school at 9am on Tuesday. She will be clear to return on Wednesday, given that her fever does not return and she has not had fever reducing medication. (2) If Joey is sent home from school following 2 cases of diarrhea on Monday, he (nor his sibling) may not return to school on Tuesday (even if he has not had any diarrhea after leaving the center).

If you are still unsure whether to send your child to the center due to a cough or runny nose, here are some questions to consider beforehand:

- Have the child seen by the doctor to rule out anything serious.
- Is the child miserable, irritable or lethargic?
- Is he/she able to participate in the program's daily activities?
- Can the child cover his/her cough consistently?
- Consider the well-being of the other kids in the program. Is this cough putting other kids at risk?
- Is there anything unusual about the runny nose? Color? Intensity?
- Is the child lethargic or irritable?
- Can the child keep up with the daily activities of the program?
- Does the child's symptoms pose a risk to the other kids in the program?

Head Lice

Parents will be called to come and get any child who has head lice or nits. All of the child's bedding must be taken home and thoroughly cleaned. The child will not be allowed to return to school until he or she is not only lice-free, but nit-free.

Sign-In/Out Procedure

Parents must sign children in and out of the WELL Center. Parents are able to sign their child in or out via the Procare App on their phones. Children will be released only to individuals authorized to pick them up. A written note is necessary if someone else is picking up the child. The WELL Center will not release minors to minors. The person picking up must be at least 18 years of age.

Discipline

Children are expected to obey the staff for their own safety and the well-being of every child in the program. Positive reinforcement, redirection, loss of privileges and time-out will be used to modify behavior. Corporal punishment will not be used. Children will not be deprived of food, water, or other personal comforts. Discipline will be administered in a firm, but loving way. Examples of daily discipline strategies may include but are not limited to:

- **Positive Reinforcement:** special treat/stickers provided at the end of the day or certificate for maintaining appropriate school behavior throughout the day or during a specific point in the day.
- **Redirection:** suggesting alternate activities or friends to play with when a child seems unable to make positive and appropriate choices during lesson/play.
- **Loss of Privileges:** Children may be asked to sit out during special activities (such as movie day) if they are unable to make positive choices prior to or during that activity.

- **Time-Out:** Children may be asked to sit in a special place in the classroom under teacher supervision or be sent to the office to sit with the director when displaying inappropriate behavior (not listening to instructions given by teachers after multiple redirections, using inappropriate language, being aggressive towards teachers and/or friends, etc.). Children must remain quiet and not be disruptive while in a time-out area.

Parents may be asked to remove a child from the WELL Center in the event of excessive behavior problems. Excessive behavior is defined as (but not limited to) hitting/kicking (other students or teachers), spitting on other persons, throwing toys or furniture, profanity, biting (see below) or if it is felt that their behavior is causing danger to themselves and/or other children. A parent will be called to pick up their child after 3 documented acts of excessive behavior within a school day (7am-6pm). If a parent is asked to pick up the child, the child may NOT return to the WELL Center on the following day.

If the behavior continues beyond a week's time, parents will be asked to meet with the director, assistant director and the child's teacher to complete and sign a behavior plan. If the behavior plan is unsuccessful or the parent and/or child fail to comply with the plan, the director will discuss further action with the WELL Center Committee (possibly resulting in suspension or expulsion of the child).

Biting Policy- Staff at the WELL Center understands that biting can be an age-appropriate behavior, particularly for the toddler age group; However, after 3 bites in a 24 hour period resulting in injury (defined as red marks, bruising, skin-break or injury requiring medical assistance by staff- such as bandage or ice) a parent will be contacted and asked to pick up the child for removal from the center for the remainder of the day. Should the behavior continue, the Director reserves the right consult the WELL Center Committee for further action.

Parent Behavior Policy

The WELL Center's primary goal is to provide a loving and safe Christian environment for students, parents, and staff. Part of creating that environment is a productive and open line of communication between staff and parents. To help facilitate appropriate communication, we have written the following guidelines for interactions between parents and staff:

1. Respectful Communication and Interactions:

- **Language:**

  Parents should use respectful and positive language when interacting with staff and other parents. No cursing, derogatory comments, or slurs will be tolerated.

- **Tone:**

  Maintain a calm and non-confrontational demeanor, even when expressing concerns. Communication is best achieved when both parties are peaceful, collected, and able to express concerns in a constructive manner. Sometimes, this cannot be achieved at pick up or drop off when staff are attending to students and performing their duties during their working hours. Please feel free to message the teacher or director to set up a one-on-one conference if necessary, during afterschool hours.

- **Respect for Staff:**

  Treat staff with courtesy and acknowledge their expertise in childcare. Everyone is capable of learning and improvement. However, our staff are regularly trained and met with concerning professional development. With many years of collective

experience and lower-than-average turnover rates, the WELL Center prides itself on providing a quality education experience for both students and parents.

- **Respect for Other Families:**
  Be mindful of other families and children during drop-off and pick-up times.

2. Drop-off and Pick-up Procedures:

- **Timeliness:**

  Arrive on time for drop-off and pick-up to avoid disruptions to the daycare schedule.

- **Designated Areas:**

  Follow designated drop-off and pick-up areas to ensure safety and efficiency.

- **Clear Communication:**

  Inform staff of any changes in pick-up arrangements or if someone else will be picking up the child.

- **Safe Practices:**
  Ensure children are safely secured in their vehicles and supervised during drop-off and pick-up.

3. Addressing Concerns and Issues:

- **Open Communication:**

  Parents should first discuss concerns with their child's designated teacher to resolve classroom problems. Concerns can be escalated to the assistant director, director, or pastor should a resolution not be reached with the staff member directly. A final review can be made by the WELL Center Committee should the admin fail to meet policy criteria for resolving an issue or concern. The Committee should only be met as a last resort, and any decision reached by the Committee is final.

- **Prompt Resolution:**

  Staff are expected to work collaboratively with parents to address concerns promptly and effectively, during business hours of 7 AM-5:30 PM.

- **Documentation:**

  Staff are to report any incidents of parents exhibiting aggressive or inappropriate behavior to the assistant director or director immediately. The behavior will be documented and reported to the committee following the first offense.

- **Conflict Resolution:**
  Process for resolving conflict:
  - Communication with teacher/staff members specific to child's care.
  - Communication with the assistant director or director.
  - Communication with the pastor.
  - Meeting with WELL Center Committee.

4. General Conduct:

- **No Disruptive Behavior:**

Avoid any behavior that could be disruptive or cause discomfort for other children or staff.

- **Cleanliness:**

  Maintain a clean and tidy environment while at the daycare.

- **Adherence to Rules:**

  Follow all daycare rules and regulations, including those related to health and safety.

- **Positive Role Modeling:**
  Parents should serve as positive role models for children, demonstrating good behavior and respect for others.

Lunch

Children are required to bring their own lunch each day. Due to health regulations, all classes will need to have lunches that do not require heating. Morning and afternoon snacks will be provided by the WELL Center. Parents must notify the Center of any allergies children may have.

Once a month, Special Lunch day will be observed. You will not need to bring lunch for your child on that day. The cost of this lunch is included in your Activity Fee.

Registration

To register your child yearly, you must pay the $55 material fee $55 activity fee. Return a signed Medical Authorization Form, Photo Consent, a signed policy agreement from the Parent Guidebook as well as the items on the Supply list. Accounts are required to be in good standing at the time of re-enrollment. After the re-enrollment period, enrollment is offered on a first-come, first-served basis.

General Information

- Parent-teacher conferences will be scheduled from time to time. Parents may request a conference, but should not expect teachers to be available during the school day when the teacher is on duty.
- Toys may not be brought from home unless the teacher gives such permission.
- The Center is covered by public liability insurance.
- Two changes of clothing **must** be kept at the Center at all times. These clothes must be labeled with the child's name. Children in diapers or pull-ups must bring extra diapers and wipes.
- Weather permitting, children will go outside twice per day. On extremely cold/hot days this time will be short or spent in the fellowship hall above the WELL Center.
- Children should dress in comfortable clothes; **no sandals, clogs, dressy shoes, open-toe shoes or flip-flops** please. Bare feet are not allowed. Socks are encouraged. Leggings or shorts are required to be worn under skirts and dresses.
- No play guns or other play weapons are allowed at the WELL Center. Children are strongly discouraged from engaging in violent play.
- Students are discouraged from bringing home toys (aside from nap items to be left on their cot, teacher requested show-and-tell or specific comfort items approved by the supervising teacher).

Tablets and electronics from home are prohibited. The Center is not responsible for any items lost, stole or broken on premises.

- The staff of the WELL Center is required by law to report any cases of suspected child abuse or neglect to the Nelson County Department of Social Services.

EMERGENCY MEDICAL CONSENT FORM

Woodland Early Life Learning Center has my permission to obtain emergency medical treatment for my child, _____ when I cannot be reached or if a delay in reaching my child would be dangerous for him/her.

Mother/Guardian's Name _____

Home Phone _____ Cell Phone _____

E-mail Address: _____

Father/Guardian's Name_____

Home Phone _____ Cell Phone _____

E-mail Address: _____

My insurance provider is _____

My child's medical record number is _____

Preferred hospital/treatment center _____

My child is taking the following medications

_____ _____ _____

My child has the following allergies

_____ _____ _____

I understand that I assume all financial responsibility for any treatment or injuries sustained by my child while he/she is in child care.

_____ _____

Signature of Parent or Guardian Date

_____ _____

Signature of Parent or Guardian Date

Woodland Early Life Learning Center

Parent Guide Policy Agreement

We, the parents/guardians of _____, have read the policies and requirement as set forth in this manual and agree to abide by them.

Photo Release Form

This release form is for the purpose of allowing Woodland Baptist Church/WELL Center to place pictures that may include your child on the Woodland Baptist Church website, in the Nelson County guidebook (group photo), informational bulletins boards within the church, and newsletters to Woodland Members and other forms of media. Please initial your decision below:

_____ I give permission for Woodland Baptist Church/WELL Center permission to publish my child's photo.

_____ I do NOT give permission for Woodland Baptist Church/WELL Center to publish my child's photo.

_____ _____

Parent Signature Date

_____ _____

Parent Signature Date

Woodland Early Life Learning Center

4434 Thomas Nelson Highway
Arrington, VA 22922
434-263-6811

Facebook Photo Permission

Woodland Early Life Learning Center has a facebook page. As the parent or legal guardian of this WELL Center student, I give permission to post photos of my child on facebook. I understand that these photographs are for the sole purpose of showing examples of classroom activity, or photographs to show our family or community involvement with on-site events or field trips. Photographs will not be distributed in any other manner or used to exploit any child. Please note that names of children will not be posted on facebook, only photos.

Please check one of the following options below, sign and return:

_____Yes, I give permission for photos of my child to be posted on the WELL Center Facebook Page.

_____Yes, I give permission for photos of my child to be posted on the WELL Center Facebook Page, only if my child's face is not visible in the photo.

_____No, I do not give permission at all for my child's photo to be posted on the Beginnings and Beyond Facebook Page.

Child's Name: _____

Parent/Guardian's Signature_____ Date_____

Parent/Guardian's Signature_____ Date_____

Gymnastics:
Liability and Assumption of Risk Agreement

I, for my child, agree to hold harmless Woodland Early Life Learning Center and all associated staff of any personal or property liability and/or personal injury while participating in this program. I understand that due to the nature of the that physical injury is possible.

In the event of illness or injury to the participant, where in judgement of Woodland Early Life Learning Center director, Heather McGann, emergency treatment is required, my permission is granted to obtain immediate medical care. I agree to be responsible for all expenses that arise out of such actions.

I have read this release of liability and assumption of risk agreement. I fully understand its terms, and sign it freely and voluntarily without inducement; However, I also understand that baring the completion of this waiver/agreement, my child will not be allowed to participate in the gymnastics program to protect the center in the case of injury or illness.

_____ _____

NELSON COUNTY GYMNASTICS
REGISTRATION AND RELEASE FORM

Name _____

Age _____ Date of Birth _____ School _____

Address _____

City _____ State _____ Zip Code _____

Phone (____) _____ Cell Phone (____) _____

Parents Name _____

Parents E-mail Address _____

Emergency Contact _____

Phone (____) _____ Cell Phone (____) _____

Does your child have any physical condition that the instructor should be aware of?

Please list or explain: _____

_____

LIABILITY AND ASSUMPTION OF RISK AGREEMENT:

I, for my child, & myself agree to hold harmless Nelson County Recreation, Nelson County and Beth Morazes of any personal or property liability and/or personal injury while participation in this program. I understand that due to the nature of the activity that physical injury is possible.

In the event of illness or injury to the participant, where in the judgment of Beth Morazes, emergency treatment is required, my permission is granted to obtain immediate medical care. I agree to be responsible for all expenses that arise out of such actions.

I have read this release of liability and assumption of risk agreement. I fully understand its terms, and sign it freely and voluntarily without inducement.

Signed_____ Date _____