

# Behavior Policy and Waivers

## Code of Conduct~

- I will be respectful of the KidCove community by following all of its rules.
- I will protect and care for supplies and materials used.
- I will show pride by cleaning up after myself and respecting all spaces, both inside and outside.
- I will not engage in behaviors that are unsafe, harmful or hurtful to other children or staff in the program – including physical fighting, hitting, pushing, biting, running away or threatening language.
- I will be respectful of staff and other adults involved in the programs.
- I will show consideration for others by using an appropriate voice level and language by listening and demonstrating respect at all times.

Our policy concerning this code of conduct is based on the individual need of the child, the ability of each child to understand what he/she is doing and the consequences of their actions. A child is never made to feel that the outcome of an act will result in physical or verbal abuse. Positive reinforcement is always encouraged and children are told what they are doing well.

By signing this form, it means you understand and agree to follow these guidelines to make your time at KidCove safe and enjoyable for everyone.

I have read and understand the KidCove Behavior Management Policy

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

**PARENT AUTHORIZATION FOR EMERGENCY TREATMENT**

In consideration of admittance, I \_\_\_\_\_ parent/guardian,  
hereby authorize KidCove to arrange for medical examination and/or treatment of  
my child \_\_\_\_\_, should an emergency arise at the center or on a  
field trip. It is understood that a conscientious effort will be made by the center to  
contact me at the emergency numbers I have provided below, before any medical  
action is taken. I would prefer to have my child, if the need arises, taken  
to \_\_\_\_\_ hospital.

**RELATIVES OR OTHER PERSONS TO CONTACT IN AN EMERGENCY SITUATION:**

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ RELATION: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ RELATION: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ RELATION: \_\_\_\_\_

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Guardian's signature	Relationship	HOME phone	CELL Phone	WORK Phone
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Consent to Participate ~

I, \_\_\_\_\_ (parent/guardian) consent to \_\_\_\_\_ (Childs/childrens names) participation in all activities held at KidCove during all activities. It is understood that there are certain risks that may result in damages or injuries during the child's participation in these activities. I, \_\_\_\_\_ (parent/guardian) accept and assume all risks of injury or harm on behalf of my child/children associated with or resulting from participation in such activities. I certify that my child/children is fully capable of participating in all activities and has no physical or mental disabilities that would restrict his/her full participation. If the child has any restrictions which should be brought to the attention of the director, please list here:

Waiver/Release ~

In consideration of the acceptance of my application for KidCove Events, I hereby waive, release, and discharge any and all claims for damages for personal injury or property damage which may hereafter occur to my child/children as a result of their participation in said activities/events. This release is intended to discharge in advance KidCove LLC, its employees and volunteers from liability, even though that liability may arise out of perceived negligence on the part of persons mentioned above. In addition, I hereby for myself and my child/children, agree to hold harmless and fully indemnify KidCove LLC, its members, employees and volunteers from any and all liability, including attorneys' fees, for any personal injury and/or injury to any third-party child resulting from my child/children's actions/participation in all of the center's activities.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_