



Organization of Special Needs Families (OSF)

Family Handbook

Integrated Learning Center: 20920 McClellan Road, Cupertino, CA 95014

Phone 408 996-0850

Fax 408-996-0850

Email: osf@osfamilies.org

Website: www.osfamilies.org

Our Mission

We believe in and support community integration for individuals with special needs toward an independent, productive, and normal life;
to advocate for stable & healthy environments for families and individuals with special needs.

We admit students of any race, color, religion, sex, national origin and ancestry.
We are a public-benefit, not-for-profit organization as determined under section 501(a) as described in section 501(c)(3).

San Andreas Regional Center Vendor
#HS0565-851 Day Care Services
#HS0604-851 Day Care Services
#880 Transportation

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Description of Services

We provide programs for all children with or without disabilities. We serve typically developing children and children with special needs, defined as follows: those who have a temporary or chronic condition, or disability due to illness, accident or neurological defect. These individuals may be physically, emotionally, mentally and/or learning disabled. All children are unique in their development and any definition of typical development must constantly evolve as we discover new knowledge. Having said that, there are significant events during the course of growth that help us know that a child is developing typically without exhibiting any of the characteristics attributed to a child with special needs.

Programs, Hours, and Locations:

Integrated After School Program

Monday through Friday 2 to 7:00pm
@ OSF Learning Center

We provide a safe and educational enrichment program for children during after school hours. We provide positive guidance, assistance and encouragement to help students to reach their maximum potential. We believe that all families and individuals can live an active and full life as other members in the community, regardless of disability. Thus, with the "whole child" approach, we address equal importance on the spiritual, intellectual, emotional, social, and physical development of each unique child. Our child care programs include, but are not limited to:

- Homework completion and comprehension; tutoring is available when needed;
 - Academic Enrichment with additional curriculum and creative learning aids;
 - Relationship building and recognition between children with and without disability;
 - Establish self-esteem and respect for others throughout the program session;
 - Music, OT, Arts and Crafts, Computer, Folk dance, Yoga, Sports, and more;
 - Community outings to establish functional skills and community awareness.
- Staff to student ratio is 1:3 and 1:1

Integrated Social Group

Saturday 1-2pm @ OSF Learning Center

We provide fun and social skill learning activities. Through the professionally designed activities, children with special needs learn and acquire play and social interaction; leadership and advocate developing for typical peers. Our primary goal is to teach children with special needs to enjoy playing and interacting with their peers without assistance.

Our Integrated Social Group includes: Age appropriate games and activities; OT related activities, music rhythmic activities, a small group setting; The ratio for student with special needs and typical peer is 1:1

Enrichment Program

Saturday 2-4pm @ OSF Learning Center

We provide extra curricular programs for children with special needs in our safe and loving environment. The curriculum includes Occupational Therapy, Music and Reading, Computer, and Physical Exercise and Sports. These 4 stations are conducted by professionals with lesson plans designed and modified to meet each individual's needs. We have trained community members, most of them are high school students, to be the teaching assistants who provide close supervision and need prompts.

Students are grouped by appropriate ages; Students rotates from OT, Music, Computer and APE stations;

The ratio for students with special needs and trained teaching assistants is 1:1

Summer Day Care Program

4 weeks in July and August
Monday through Friday 9am to 3pm
@ Community parks and centers

To align with the OSF Mission, we are committed to providing a safe and secure 4-week summer camp that gives children an opportunity to participate in a variety of specific activities throughout the day. All activities are conducted at community places where our students will enjoy activities as: swimming, hiking, cooking, arts and crafts, music, dance, sports, picnics, story reading, playground activities, computer programs, games and more.

We go to different community places each day; The ratio for counselor to student is 1:2 and 1:1

Integrated Child Care

We have created an integrated child care program for families who need child care. This service is welcome to all children. There is an age appropriate curriculum designed specifically for the program. As an integrated environment, we strive to engage people with disabilities in order to ensure fullness and quality of life. Our child care program includes:

Music, singing, dancing, story telling, book reading, rhythmic body movement, and more;

Educational computer programs and fun computer games, arts and crafts;

Playground and Physical exercise, basketball, soccer, T ball, jogging, trampoline jumping,

Snack, videos, group games, floor exercise, OT exercise, and more;

The staff to child ratio is 1:3;

Independent Living Skills Training

We provide Independent Living Skills Training for youths (6th grade and up) to prepare for their future independent living arrangements. This training is geared towards basic independent living skills through several learning components. Our goal is to enhance their self-help skills and community involvement to create a higher quality of life. The curricular programs include food purchasing, dinner preparation and cooking, age appropriate social games, sports, community outings, bus riding, shopping, clothes folding and hanging, room cleaning, and more. We will cook and enjoy dinner together. Assistant to Student ratio, 1:2 assistance is expected.

Policies and Procedures

Admission and Participation Simply complete the application packet. Be sure to be accurate, sign all required forms and update the information as needed. The admission procedure is as following:

1. Initial face-to-face interview with family
2. complete application package, and commit obligation & support to OSF
3. Schedule attendance & pre-pay tuition

Sign-in and sign-out procedures We are expected by the California Community Care Licensing Division to require that each child be signed IN and OUT by a parent, guardian or authorized representative each time they receive services. Please help us to retain funding assistance and keep good evaluative records for our partner organizations by ensuring that you complete the in/out sheet for your child.

Release of children Children will be released only to authorized persons (parent, guardian or authorized representative at least 16 years of age) designated on the child's Identification, Health and Emergency Form. Identification will be required. It is your responsibility to notify us of any changes to this form.

Staff to Child Ratios Varies by program, please see Program Description.

Information Updates It is important that the information in your Application Packet is current. Please notify us of any changes. Please notify us of medical record updates; and it is very important for us to have your cell phone number on file, in case of emergencies.

Medications Should it be necessary for staff to give your child any medication during the hours they are in our care, the following procedures must be followed:

1. A Medication Sheet must be completed and signed by the parent or guardian.
2. All prescription medications must be in the original container, child's name, physician's name and dispensing instructions must be clearly labeled on the container.
3. Over-the-counter medications (for example, cough syrup, aspirin) will only be administered when a completed Medication Sheet is provided and both the form and the medication is given to the Program Director.

All medication will be kept in a locked cabinet.

Illness Children may be excluded from the program if symptoms such as high temperature, rash, diarrhea, signs of infection, etc. appear. Children with these symptoms will not be admitted. If a child develops these symptoms while in our care, a staff member will contact the parent or guardian and will separate the child from other children in an effort to reduce exposure. All care will be given to keep the child comfortable and safe until pick-up.

Accidents If your child is involved in a minor accident, the details will be provided on your report home. Appropriate first aid will be given. If it is determined that a physician's care is required, the parent or guardian will be notified immediately and emergency instructions will be followed. If parent or guardian and other designated persons on the Identification, Health and Emergency Form are unavailable, the child will be taken to the nearest hospital for treatment.

Absences When your child is ill or for any reason and will be absent, please notify us by phone or email **at least 24 hours** prior to the day, so that we have time to adjust staffing and classroom preparation. Failure to make advance notice will result in service termination and non-refundable tuition.

Dress Please dress your child in comfortable, washable, weather-appropriate clothing. The children will be participating in activities which may include painting, pasting, watering, etc. We take reasonable precautions to protect clothing but kids get dirty no matter how hard we try to keep them clean. Please provide at least one change of clothes.

Food/special diet We provide snacks during which a child is in our care. Children may bring their own special snack if they prefer and/or due to special diet. Please keep us informed if there is any change of diet intervention. The snack we provide is of a quality and quantity necessary to meet the children's needs.

Visitor/Observation Policy We welcome scheduled and unscheduled visits by parents or guardians at any time. Since the safety and well-being of the children in our care is our top priority, we would appreciate it if all other visitors scheduled an appointment in advance; and stay out of the classroom to minimize the distraction of teaching at all times.

Safety We complete annual fire inspections by the San Jose Fire Department. On our premises, we have 5 smoke detectors, 1 fire extinguisher and 1 fire alarm. We conduct fire drills monthly. An evacuation plan and fire drill schedule are posted in the kitchen near our phone and emergency contacts. As mandated by the State of California, we have an Emergency Disaster Plan (also posted) and an Earthquake Preparedness checklist.

Late Pick Up Financial Charge All children must be picked up by closing time. When parents and/or guardians arrive at the OSF Learning Center later than closing time, it will be considered as late pick up. OSF allows for 10 minute grace period. After which parents will be charged **\$1.00 for every minute** thereafter.

Aggressive Behavior support from parents When the student exhibits aggressive behaviors which include hitting, biting, pushing, scratching, and other behaviors that Program Director may consider a concern; the **parents will be required to provide their own 1:1 Teaching Assistant other than parents** to accompany the student.

Facility Damage Parents are full responsible for facility damage regardless of intentional or accident. The Facility Manager will make the repairmen accordingly and cost need to pay immediately upon job done.

Family Obligation & Participation We rely heavily on volunteers to run our programs and organization. Each family helps by joining **at least one of the following volunteer committees**; and **commitment to participate annual events of Special Needs Conference & Festival in May and Fundraiser Dinner in November**:

Community Outreach Committee - Market, communicate, and promote OSF to community. Coordinate OSF participation in community events.

Program Volunteer Committee - Develop volunteer growth programs and coordinates volunteers who help with OSF programs.

Family Affairs Committee - Coordinate social/community outings for families. Advise OSF on policies and programming.

Fundraiser Committee - Develop and coordinate fundraiser efforts and events.

Technology Committee - Investigate, evaluate, implement, and maintain computer technology to support the operation of OSF.

Financial Information

Program Fees

Program	Rate	Registration Requirements
Integrated After School Program	\$600 per month \$420 for December	Monthly enrollment
Summer Full Day Care	\$250 per week \$75 daily \$600 per week \$120 daily	
Enrichment Program	\$22 per session	Quarterly enrollment
Integrated Social Group	\$12 per session	Quarterly enrollment
Summer Camp	\$300 per week	Weekly enrollment
Transportation service to afternoon care	Add \$25 per week	Weekly enrollment
Independent Living Skills Training	\$50 per session (including dinner)	Quarterly enrollment
Integrated Child Care	\$50 per session (4 hours each session)	Pay in advance
HEALTHY START Parent Workshop (Includes Child Care)	Free, fully funded by FIRST 5, Santa Clara	Free of charge

Parents' Rights

As a parent, guardian or authorized representative, you have the right to:

1. Enter and inspect the center site without advance notice whenever children are in care.
2. File a complaint against the licensee.
3. Review reports of licensing visits and substantiated complaints against the licensee.
4. To make a complaint against the licensee.
5. Be notified of any person not allowed in the child care site.
6. Request that a non-custodial parent not be allowed to visit a child IF you have a court order.
7. Receive the Licensing office name, address and phone number.
8. Be notified of any adult who has been granted a criminal record exemption.
9. Receive the background check process.

NOTE: The law authorizes the Organization of Special Needs Families staff to deny access to a parent, guardian or authorized representative if they are behaving in a way which poses a risk to the children in care.

For more detail about parental rights, please see our Application Packet which includes the State of California Form "Family Child Care Home Notification of Parents' Rights."

Children's Rights

Each child has personal rights which include, but are not limited to the right:

1. To be treated with dignity in their personal relationships with staff.
2. To be accorded a safe, healthy and comfortable environment.
3. To be free of corporal or unusual punishment, infliction of pain, humiliation, intimidation, ridicule, coercion, threat, mental abuse or other actions of a punitive nature.
4. To be informed and have their authorized representative, parent or guardian be informed of the provisions of the law regarding complaints including but not limited to the address and phone number of the licensing office.
5. To leave or depart the child care site at any time under the supervision of a recognized parent, guardian or authorized representative.
6. To not be placed in any restraining device, except a supportive restraint approved in advance by the licensing agency or other professional service providers.

Grievance Process

If a family has a grievance of any kind regarding the child care site, its' personnel or its' operation, the following is the grievance procedure. It is our desire to remedy the situation at the lowest possible level.

1. Discuss the grievance with the Program Director - Lihuei Wei at lihueiw@osfamilies.org. If the issues are not resolved, go to #2.
2. Submit the grievance in writing to the Executive Director at osf@osfamilies.org of Organization of Special Needs Families. The Executive Director will immediately meet with all involved and try to mediate the matter. If the issues are not resolved, go to #3.
3. Submit the grievance in writing to the Board of Directors of Organization of Special Needs Families. A Board Director will immediately meet with all involved and try to mediate the matter. If the issues are not resolved, go to #4.
4. Submit the grievance to the Licensing Office:
The Department of Social Services
Community Care Licensing Division
111 North Market Street, Suite #300
San Jose, CA 95113-1101
408 277-1286

2009 Schedule

Integrated Social Group, Enrichment Program, Summer Camp



<p style="text-align: center;">Winter & Spring</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>1</td><td>January</td><td>10</td></tr> <tr><td>2</td><td></td><td>17</td></tr> <tr><td>3</td><td></td><td>24</td></tr> <tr><td>4</td><td></td><td>31</td></tr> <tr><td>5</td><td>February</td><td>7</td></tr> <tr><td>6</td><td></td><td>14</td></tr> <tr><td>7</td><td></td><td>28</td></tr> <tr><td>8</td><td>March</td><td>7</td></tr> <tr><td>9</td><td></td><td>14</td></tr> <tr><td>10</td><td></td><td>21</td></tr> <tr><td>11</td><td></td><td>28</td></tr> <tr><td>12</td><td>April</td><td>4</td></tr> </table> <p style="text-align: center; margin-top: 20px;">Mid-Year & Summer</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>1</td><td>April</td><td>11</td></tr> <tr><td>2</td><td></td><td>18</td></tr> <tr><td>3</td><td></td><td>25</td></tr> <tr><td>3</td><td>May</td><td>2</td></tr> <tr><td>4</td><td></td><td>9</td></tr> <tr><td>5</td><td>(morning)</td><td>16</td></tr> <tr><td>6</td><td></td><td>30</td></tr> <tr><td>7</td><td>June</td><td>6</td></tr> <tr><td>8</td><td></td><td>13</td></tr> <tr><td>9</td><td></td><td>20</td></tr> <tr><td>10</td><td></td><td>27</td></tr> <tr><td>11</td><td>July</td><td>11</td></tr> <tr><td>12</td><td></td><td>18</td></tr> </table>	1	January	10	2		17	3		24	4		31	5	February	7	6		14	7		28	8	March	7	9		14	10		21	11		28	12	April	4	1	April	11	2		18	3		25	3	May	2	4		9	5	(morning)	16	6		30	7	June	6	8		13	9		20	10		27	11	July	11	12		18	<p style="text-align: center;">Fall</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>1</td><td>August</td><td>29</td></tr> <tr><td>2</td><td>September</td><td>12</td></tr> <tr><td>3</td><td></td><td>19</td></tr> <tr><td>4</td><td></td><td>26</td></tr> <tr><td>5</td><td>October</td><td>3</td></tr> <tr><td>6</td><td></td><td>10</td></tr> <tr><td>7</td><td></td><td>17</td></tr> <tr><td>8</td><td></td><td>24</td></tr> <tr><td>9</td><td></td><td>31</td></tr> <tr><td>10</td><td>November</td><td>7</td></tr> <tr><td>11</td><td></td><td>14</td></tr> <tr><td>12</td><td></td><td>21</td></tr> <tr><td>13</td><td>December</td><td>5</td></tr> <tr><td>14</td><td></td><td>12</td></tr> <tr><td>15</td><td></td><td>19</td></tr> </table> <p style="text-align: center; background-color: yellow; margin-top: 20px;">Holidays, Breaks & Event</p> <p>1/1 New Year 1/19 Martin Luther King 2/16 President Day 5/15 5TH Annual Special Needs Conference 5/25 Memorial Day 7/4 Independence Day 9/1 Labor Day 11/15 6th Annual Fundraiser Dinner 11/26,27 Thanksgiving Day 12/12 Year End Volunteer Appreciation Party 12/21-31 Holiday break</p>	1	August	29	2	September	12	3		19	4		26	5	October	3	6		10	7		17	8		24	9		31	10	November	7	11		14	12		21	13	December	5	14		12	15		19	<p style="text-align: center;">Summer Camp</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr><th>Week</th><th>Date</th></tr> </thead> <tbody> <tr><td>1</td><td>7/20 – 7/24</td></tr> <tr><td>2</td><td>7/27 – 7/31</td></tr> <tr><td>3</td><td>8/3 – 8/7</td></tr> <tr><td>4</td><td>8/10 – 8/14</td></tr> </tbody> </table> <p style="text-align: center; margin-top: 20px;">After School</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr><th></th><th>Date</th><th># of days</th></tr> </thead> <tbody> <tr><td>1</td><td>1/5 – 1/30</td><td>19</td></tr> <tr><td>2</td><td>2/2 – 2/27</td><td>19</td></tr> <tr><td>3</td><td>3/2 – 3/31</td><td>22</td></tr> <tr><td>4</td><td>4/1 – 4/30</td><td>22</td></tr> <tr><td>5</td><td>5/1 - 5/29</td><td>20</td></tr> <tr><td>6</td><td>6/1 - 6/30</td><td>22</td></tr> <tr><td>7</td><td>7/1- 7/31</td><td>22</td></tr> <tr><td>8</td><td>8/3 – 8/31</td><td>21</td></tr> <tr><td>9</td><td>9/1 – 9/30</td><td>21</td></tr> <tr><td>10</td><td>10/1 -- 10/30</td><td>22</td></tr> <tr><td>11</td><td>11/2 -- 11/30</td><td>19</td></tr> <tr><td>12</td><td>12/1 -- 12/18</td><td>14</td></tr> </tbody> </table>	Week	Date	1	7/20 – 7/24	2	7/27 – 7/31	3	8/3 – 8/7	4	8/10 – 8/14		Date	# of days	1	1/5 – 1/30	19	2	2/2 – 2/27	19	3	3/2 – 3/31	22	4	4/1 – 4/30	22	5	5/1 - 5/29	20	6	6/1 - 6/30	22	7	7/1- 7/31	22	8	8/3 – 8/31	21	9	9/1 – 9/30	21	10	10/1 -- 10/30	22	11	11/2 -- 11/30	19	12	12/1 -- 12/18	14
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Enrichment Program

- Every Saturday 2-4pm at Site 1, Integrated Learning Center
- Students are grouped by appropriate ages
- All students are paired with a Special Needs trained helper; Students rotate through the following 4 stations:

1. Occupational Therapy Station

2. Music and Reading Station

	<p>Group or individual activities provide movement and sensory exploration. This station helps students to experience: Gross and fine motor skills, Eye-hand coordination, Motor-planning skills, Flexibility, Balance, and many other social and motor skills</p>		<p>Group activities provide music and reading appreciation. This station helps expose students to: Enjoyable children's literature, Rhythmic coordination through music, Relaxation techniques and focus gaining, Singing and dancing.</p>
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3. Computer Station

4. Physical Exercise and Sports Station


	<p>Individual PC and learning software are provided. This station helps students to explore: Keyboarding skills, Special Needs educational and functional computer programs, Fun computer games, Enrich academic exercises involving math, reading comprehension, language and social development.</p>		<p>Group or individual activities including physical exercise and sports are provided in a beautiful out door setting. This station will help the students to: Develop various ball skills including basketball, soccer, baseball, etc. Build team concept, Gain basic track & field skills, Enjoy exercise and games</p>
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Integrated Social Group

Teaches play skills and social skills to children with special needs in natural environment at Site 1, Integrated Learning Center

<ul style="list-style-type: none"> • Every Saturday 1-2pm Students are grouped by their ages All students are paired with their typical peers, Social skills, play skills, and language development are emphasized • Fun activities are available 	
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Integrated Child Care

<ul style="list-style-type: none"> • Sunday 1-5pm at Site 2, Integrated Child Care Center • For all children with or without special needs • Provides a safe and loving environment. Fun activities including music, singing, dancing, arts and crafts, reading, computer, sports and exercise • Snacks provided with the opportunity for social interaction with peers • The staff to child ratio is 1:4 	
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Adaptive Skills Training

Every Saturday 4-7:30pm at office for youth and adults at OSF Integrated Learning Center

The curricular programs include food purchasing, dinner preparation and cooking, age appropriate social games, sports, community outings, bus riding, shopping, clothes folding and hanging, room cleaning, and more. We will cook and enjoy dinner together. 1:1 assistance is expected

After-School Enrichment

We provide positive guidance, assistance and encouragement to help students to reach their maximum potentials.

- Monday through Friday from 2pm to 7pm at Site 1, OSF Learning Center.
- All special needs students, regardless of grade, are welcome. Typical peers K – grade 8 are also welcome.
- Homework completion and comprehension; and tutoring available.
- Build positive relationship between children with and without disability.
- Nutritious snack is provided.
- Every Integrated Social Group, Occupational Therapy and Music Therapy are provided.
- The staff to children with special needs ratio is 1:3 and 1:1.

Integrated Summer Camp

We are committed to provide a safe and secure 4-week summer camp that give children an opportunity to participate in a variety of specific activities throughout the day.

- 4 weeks in July and August. 9am-3pm daily.
- Various facilities include Special Needs Integrated Learning Center, Memorial Park, Cupertino Sports Center, San Antonia Ranch Park, Blackberry Farm, and YMCA.
- Activities include computers, hiking, science, swimming, cooking, sports, gardening, and arts and crafts.

“HEATHY START” Parent Workshop

Professionals talk, skills building on education, early intervention, best practice, peer support, and related services. Please visit website for topics and locations

Site 1: Integrated Learning Center, 20920 McClellan Road, Cupertino, CA 95014

Site 2: Integrated Child Care Center, 6350 Rainbow Drive, San Jose 95129

“Bringing Families and Community Together”

Our Mission

Families & individuals with special needs will live life as full and active members of their community.

Registration Procedure

We welcome you to join OSF! Please join us in the team effort to bring our families and community together and enhance the quality of life for our children.

If you are a **new family**, please

1. Complete the Family Form, page 16 of OSF Family Handbook
2. Complete the Parent Signature Form, page 17 of OSF Family Handbook
3. Complete the Registration Form(s) for program(s), along with program fee(s)
4. Complete the Acknowledgement and Agreement Form, page 24, along with Program Allowance payment if you choose to participate in the Annual Program Allowance Plan
5. Fax to (408) 996-0850 and/or mail to OSF office

We will contact you shortly to contact intake procedure of the followings:

1. Initial face-to-face interview with family
2. Clearly understand and support OSF Mission and commit family obligation & support to OSF
3. Schedule attendance & pay tuition

If you are a **returning family**, please

1. Complete the Registration Form(s) for program(s) which you desire to join, along with program fee(s)
2. Attach Program Allowance payment if your participation in the Annual Program Allowance Plan has expired and you wish to renew
3. Fax to (408) 996-0850 and/or mail to OSF office

We will contact you shortly to contact intake procedure of the followings:

4. Initial face-to-face interview with family
5. Clearly understand and support OSF Mission and commit family obligation & support to OSF
6. Schedule attendance & pay tuition

Thank you for choosing OSF to serve your children!

Family Information Form

Student Name: _____

Ethnicity: _____

Date: _____ / _____ / _____
Month Day Year

Parents/Guardian/Volunteer Information (Please print)

1. Father Mother Guardian Volunteer

Name: _____ Employer (if any): _____

Address(include city and zip): _____

Home phone #: _____ Work Phone #: _____ Cell Phone#: _____

Fax #: _____ Email: _____

2. Father Mother Guardian Volunteer

Name: _____ Employer (if any): _____

Address(include city and zip): _____

Home phone #: _____ Work Phone #: _____ Cell Phone#: _____

Fax #: _____ Email: _____

Children Information (Under age of 18)

1. With special needs Sibling Volunteer

Name: _____ Birthday: _____ / _____ / _____
Month Day Year

2. With special needs Sibling Volunteer

Name: _____ Birthday: _____ / _____ / _____
Month Day Year

3. With special needs Sibling Volunteer

Name: _____ Birthday: _____ / _____ / _____
Month Day Year

4. With special needs Sibling Volunteer

Name: _____ Birthday: _____ / _____ / _____
Month Day Year

Parent/Guardian's Signatures Form

Student Name: _____

Date: _____ / _____ / _____
Month Day Year

I. Liability Waiver

I, hereby, release the OSF staff from any liability while my family members/myself are participating in all the enrolled weekly activities.

II. Permission

By signing below, I give my permission to the OSF staff to film, photo, or tape my families for the purpose of promoting the goals of OSF.

III. Medical Information

In the even of an emergency, if the OSF staff is unable to reach me, I hereby give my consent for treatment to be given by:

Doctor's name: _____ Addr: _____ Phone #: _____

Dentist's name: _____ Addr: _____ Phone #: _____

Medical Insurance Carrier: _____ Phone #: _____

Policy #: _____ Medical I.D. #: _____

Preferred Hospital: _____, County: _____

If the parent cannot be reached, and it is determined my child needs emergency medical care, please take my child to the nearest emergency aid station, by ambulance, if necessary, for treatment.

IV. Emergency Contact Persons, other than a parent

Name	Relationship	Address	Home Phone	Work Phone	Cell Phone

V. Signature (Please note: For safety reasons, OSF reserves the right to retract service to any child who exhibits behaviors that compromises the safety of others)

Child's name: _____

Parent/Guardian's signature: _____ Date: _____

Print parent/guardian's name: _____

After School & Summer Enrichment Program Registration Form

Student Name: _____

Year: 2009

Date: _____/_____/_____

After School		Month	Day	Year
1/5 – 1/30	7/1- 7/31			
2/2 – 2/27	8/3 – 8/31			
3/2 – 3/31	9/1 – 9/30			
4/1 – 4/30	10/1 -- 10/30			
5/1 - 5/29	11/2 -- 11/30			
6/1 - 6/30				
12/1 – 2/18				

Summer full day		
6/15 – 6/30	7/1- 7/17 (exclude 7/3)	8/17 – 8/19
\$600 weekly , \$150 daily		

Fees: \$ _____ Status: Check # _____ Staff initial _____ Note: _____

Enrollment Status: New Continue Return

Note: If you marked New, please also complete the Family Form and Signature Form.

If you are continuing or returning families and your personal information has changed, please let us know.

Parent/Guardian/Sibling Information

Names of Parents/Guardians: _____

Names of Siblings: _____

Children with Special Needs Information

Age: _____ Birthday: _____ Diagnosis: _____

Strength: _____ Weakness: _____ Special Diet: _____

Behavior concerns (please circle all that apply): hitting others kicking others biting others

pushing others scratching others tantrums inappropriate touching throwing objects

inappropriate remarks or gestures other _____

How often are these behaviors exhibited: Several times in one hour several times/day

Individual Education Plan 1-3 times/hour 1-3 times/week rarely

My child's learning style (please check all that apply) Visual _____ Auditory _____ Hands-on _____

Subject	Current level	Short term goal
Reading		
Writing		
Communication		
Gross motor		
Fine motor		
Physical Exercise		

Integrated Social Group/Enrichment Program Registration Form

Student Name: _____

Date: ____/____/____
Month Day Year

Year: 2009

	Social Group (1-2pm)	Enrichment Program (2-4pm)
Quarter	Rate	Rate
Winter&Spring	\$144	\$264
MidYear&Summer	\$144	\$264
Fall	\$180	\$330

Enrollment Status: New Continue Return

Note: If you marked New, please also complete the Family Form and Signature Form.

If you are continuing or returning families and your personal information has changed, please let us know.

Parent/Guardian/Sibling Information

Names of Parents/Guardians: _____

Names of Siblings: _____

Children with Special Needs Information

Age: _____ Birthday: _____ Diagnosis: _____

Strength: _____ Weakness: _____ Special Diet: _____

Behavior concerns (please circle all that apply): hitting others kicking others biting others
 pushing others scratching others tantrums inappropriate touching throwing objects
 inappropriate remarks or gestures other _____

How often are these behaviors exhibited: Several times in one hour several times/day
 1-3 times/hour 1-3 times/week rarely

Individual Education Plan

My child's learning style (please check all that apply) Visual _____ Auditory _____ Hands-on _____

Subject	Current level	Short term goal
Reading		
Writing		
Communication		
Gross motor		
Fine motor		
Physical Exercise		
Socialization		
Play Skill		

Summer Day Care & Afternoon Care Registration Form

Student Name: _____

Date: _____ / _____ / _____
Month Day Year

Year: 2009

7/20 – 7/24	7/27 – 7/31	8/3 – 8/7	8/10 – 8/14
Camp \$300 per week, Add \$25 per week for transportation from camp to child care center			
Afternoon Day care, \$200 per week, \$75 daily			

Enrollment Status: New Continue Return

Note: If you marked New, please also complete the Family Form and Signature Form.

If you are continuing or returning families and your personal information has changed, please let us know.

Parent/Guardian/Sibling Information

Names of Parents/Guardians: _____

Names of Siblings: _____

Children with Special Needs Information

Age: _____ Birthday: _____ Diagnosis: _____

Strength: _____ Weakness: _____ Special Diet: _____

Behavior concerns (please circle all that apply): hitting others kicking others biting others
 pushing others scratching others tantrums inappropriate touching throwing objects
 inappropriate remarks or gestures other _____

How often are these behaviors exhibited: Several times in one hour several times/day
 1-3 times/hour 1-3 times/week rarely

Individual Education Plan
 My child's learning style (please check all that apply) Visual _____ Auditory _____ Hands-on _____

Subject	Current level	Short term goal
Reading		
Writing		
Communication		
Gross motor		
Fine motor		
Sports		

Integrated Child Care Registration form

Student Name: _____

Date: _____ / _____ / _____
Month Day Year

Enrollment Status: New Continue Return

Note: If you marked New, please also complete the Family Form and Signature Form.

If you are continuing or returning families and your personal information has changed, please let us know.

Parent/Guardian/Sibling Information

Names of Parents/Guardians: _____

Names of Siblings: _____

Children with Special Needs Information

Age: _____ Birthday: _____ Diagnosis: _____

Strength: _____ Weakness: _____ Special Diet: _____

Behavior concerns (please circle all that apply): hitting others kicking others biting others
pushing others scratching others tantrums inappropriate touching throwing objects
inappropriate remarks or gestures other _____

How often are these behaviors exhibited: Several times in one hour several times/day
1-3 times/hour 1-3 times/week rarely

Notes from parents:

Acknowledgment and Agreement of Receipt of Family Handbook

After reading the Family Handbook, please sign and return this page to the Organization of Special Needs Families (OSF)

Child Name: _____

I acknowledge that I have been given a copy of the Organization of Special Needs Families (OSF) Family Handbook summarizing the corporation's guidelines and my commitment for the participation of my child. I have read and understand the contents. I also agree to commit my support for OSF annual events of annual Special Needs Conference, Festival and Fundraiser Dinner in align with OSF mission and vision.

My choice(s) of joining OSF committee as one or more of the followings:

- Community Outreach Committee**
- Program Volunteer Committee**
- Family Affairs Committee**
- Fundraiser Committee**
- Technology Committee**

Date: _____

Parent/Caretaker Signature: _____

Parent/Caretaker Name: _____