



# Teens & Tots Preschool

Preschool and High School Students Learning Together  
Serving Children Ages 3-4 Years

## Information & Registration Packet 2026-2027



### Program Information:

**Teresa Elder**

EMCC Childcare Professions Teacher  
East Rochester Elementary School

**Phone: (585) 248-6311**

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### Paperwork and Payments:

**Debbie Affeldt**

Eastern Monroe Career Center  
41 O'Connor Rd, Fairport, NY 14450

**Phone: (585) 387-3849**

## Program Overview

Teens & Tots Preschool is a child-centered early childhood program for children 3–4 years old (or turning 3 by December 2026). It is located at East Rochester Elementary School and **children from all school districts are welcome**. High school students from Eastern Monroe Career Center (EMCC) enrolled in the Childcare Professions Program facilitate all aspects of the Teens & Tots Preschool under the close supervision of their teachers. Our goal is to support child development in the areas of social, cognitive, physical, creative, literacy, and language development. Our philosophy is that young children learn best by doing and is built on developmentally appropriate practice in early childhood education. Children learn through play and active exploration of their environment through child initiated learning and teacher-directed activities. Daily activities include circle time, music, craft, a sensory table, access to various interactive classroom centers, and a room for large motor activities. We value consistent communication with caregivers and welcome questions, comments, and concerns throughout the school year. We will send home a note describing our activities for the day. Progress reports will be sent home twice yearly, and parent conferences are available upon request.

## Daily Schedule

Our typical day includes the following schedules:

	Session 1 Time	Session 2 Time
Arrival	8:45 a.m.	11:45 a.m.
Circle	8:55 a.m.	11:55 a.m.
Centers*/Craft	9:45 a.m.	12:45 p.m.
Gross Motor	10:05 a.m.	1:05 p.m.
Departure	10:15 a.m.	1:15 p.m.

\*Centers include: Blocks, Transportation, Dramatic Play, Books, Puzzles, Fine Motor, Pre-Writing, Open-Ended Creativity, Sensory, and Science Areas.

## What To Expect

We have two teachers overseeing our preschoolers and our high school students. Our high school students interact with the preschool children in order to apply what they have learned in their childcare and education coursework. In our program, preschoolers and high school students are truly learning together.



# Teens & Tots Preschool Information

## Location

The preschool is located at the East Rochester Elementary School, 400 Woodbine Ave, East Rochester, NY 14445, room #100. Drop off is at the elementary school entrance, we will meet you and your child there.

## What to Expect

Starting preschool is exciting, but it may take time to adjust. Some children may be uncomfortable in the group setting at first, some may miss their family while others will be completely fine. These are all normal reactions. You may notice that your child is tired or grumpy after their first few days of school, this too is normal. Once a routine is established, most children will adjust quickly. To encourage positive feelings about school, talk to them about their day and display their artwork at home.

## What to Wear

- ◆ Comfortable clothing that is ok to get a little dirty and allows them to be able to dress themselves.
- ◆ Sneakers and socks (**if they wear sandals or boots, please have sneakers and socks in their backpack**).
- ◆ Clothing appropriate for the weather.
- ◆ Please label all outerwear and boots!

## What to Bring to School

- ◆ A backpack to carry home projects and notes about their day.
- ◆ A complete set of labeled clothing in a zip lock bag (including socks and underwear).
- ◆ A leak proof water bottle labeled with your child's name.
- ◆ One large box of tissues.
- ◆ One container of Disinfectant wipes.

## Toys From Home...

...are better kept at home. (Info on show and tell coming soon!)

## Toileting

Children can use the bathroom whenever needed. If your child wears pull-ups, please **provide at least 2 per day** in their backpack. Please send in a **container of wipes** to keep at school if your child is in a pull up. Please inform us if your child is in the process of toilet training, and we will work with the plan you have in place. **Reminder, this is a diaper-free class.**

## Child Dismissal

We will only dismiss children to the adults you've identified on your registration form. You must notify us in writing in the event your child is being picked up by an individual not listed as an emergency contact. When this happens, **please make sure the person picking up your child has photo identification!**

## Important!

### Medication & Illnesses

We do not administer medications at school, with the exception of emergency medication. If your child shows signs of illness such as fever, coughing, stomach ache, diarrhea, etc., please keep them home! Please inform us if your child contracts an infectious/contagious condition (pink eye, strep throat, head lice, COVID etc.). We follow all district protocols and procedures related to all illnesses.

### Emergencies

In the event of an emergency concerning your child, you will be contacted immediately. Please keep all emergency contact information up-to-date by notifying us of any changes.

### School Closings

Weather related closings will be announced on the following TV stations:

- 8-WROC
- 10-WHEC
- 13-WHAM
- Spectrum News Rochester

And radio stations:

- WBEE
- WCMF
- WHAM
- WPXY
- WRMM.

We follow the East Rochester School District's school closing instructions and their yearly calendar.

## Classes and Prices

Session	Start Date	End Date	Days and Times	Price
1	10/5/26	5/28/27	3 days per week: Monday, Wednesday, and Friday, 8:45 a.m.–10:15 a.m.	\$625 year
2	10/5/26	5/28/27	3 days per week: Monday, Wednesday, and Friday, 11:45 a.m.–1:15 p.m.	\$625 year

## Payment Information

Payment Options for Either Session	Number of Installments	Amount(s) and Date(s) Due
<b>Option 1</b>	1 installment	<b>(\$25.00 discount for this option):</b> \$600.00 due with registration
<b>Option 2</b>	2 installments	<ul style="list-style-type: none"> <li>• <b>Installment 1:</b> \$325.00 due at registration</li> <li>• <b>Installment 2:</b> \$300.00 due January 29, 2027</li> </ul>
<b>Option 3</b>	4 installments	<ul style="list-style-type: none"> <li>• <b>Installment 1:</b> \$175.00 due at registration</li> <li>• <b>Installment 2:</b> \$150.00 due November 27, 2026</li> <li>• <b>Installment 3:</b> \$150.00 due January 29, 2027</li> <li>• <b>Installment 4:</b> \$150.00 due March 26, 2027</li> </ul>

**Please make checks payable to:** Monroe #1 BOCES

**Please mail payments to:**  
 Debbie Affeldt  
 Eastern Monroe Career Center  
 Teens & Tots Preschool  
 41 O'Connor Rd.  
 Fairport, NY 14450

⇒ Completed and signed **registration and health forms must be submitted along with registration fee** in order for your child to be enrolled.

**For Questions Regarding Your Payment:** please contact the EMCC office at **(585) 387-3849**.

# Teens & Tots Registration Information

## Child Information

Child Name: \_\_\_\_\_ Gender: \_\_\_\_\_ School District: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Program Start Date: \_\_\_\_\_

Parent/Guardian 1 Information	Parent/Guardian 2 Information
Relation to child:	Relation to child:
First name:	First name:
Last Name:	Last Name:
Occupation:	Occupation:
Home Address:	Home Address:
City, State, Zip:	City, State, Zip:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Work Phone:	Work Phone:
Email (required):	Email:

**Child lives with:**    Parent/Guardian 1 and 2    Parent/Guardian 1    Parent/Guardian 2

## Emergency Contacts/Authorized Pickup

**\*You must list emergency contacts in addition to a parent/guardian.  
Contacts listed are authorized to pick up your child.**

<b>Name:</b>	Relationship:	
Home Phone:	Cell Phone:	Work Phone:

<b>Name:</b>	Relationship:	
Home Phone:	Cell Phone:	Work Phone:

## Health Information

Physician's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Allergies: \_\_\_\_\_ Hospital Preference: \_\_\_\_\_

Please complete medical form and provide immunization records for all ages.

### Child Profile

Is child toilet trained? \_\_\_\_\_

Fears/Apprehensions? \_\_\_\_\_

Special Services received? \_\_\_\_\_

Child's interests: \_\_\_\_\_

Custody Orders? Attach documents \_\_\_\_\_

Goals for preschool: \_\_\_\_\_

### Sibling Information

Name	Age	DOB

## Session and Payment Information

### Session Options (select one)

<input type="checkbox"/>	<b>Session 1</b> Monday, Wednesday, and Friday 8:45–10:15 a.m. Start Date: 10/5/26 \$625	<input type="checkbox"/>	<b>Session 2</b> Monday, Wednesday, and Friday 11:45 a.m. –1:15 p.m. Start Date: 10/5/26 \$625
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Send **payment** along with this completed **registration form** and the completed **medical form** to:

*Eastern Monroe Career Center, Attn: Debbie Affeldt, 41 O'Connor Rd., Fairport, NY 14450*

If paying by check, make payable to Monroe #1 BOCES, and include your child's name on the memo line.

## Parent/Guardian Agreement and Permissions

**I consent to the enrollment of my child listed above in this facility and have been advised and read all the policies regarding the services provided by the faculty and BOCES.**

- In the event of an emergency, BOCES will make every effort to contact me. If I cannot be reached BOCES is advised to act for me according to their best judgment in an emergency requiring medical care or surgery. The physician selected may hospitalize, secure proper treatment for, or order injection, anesthesia, or surgery for my child. I am responsible for all medical treatment and care.
- I have provided information on my child's needs (allergies, diet, disabilities, and/or medical information) to the provider, as may be necessary to assist in properly caring for my child in case of an emergency.
- The information on this form is complete and accurate and I agree to review and notify BOCES staff immediately whenever a change occurs.
- BOCES is mandated by state law, to report any suspected case of child abuse or neglect to the appropriate authorities for investigation.
- I give permission for my child to be photographed or videotaped and to have the photos used in program and/or BOCES approved materials and social media. I will not be informed or reimbursed for such photographs.
- I give permission for my child to have BOCES staff apply home-supplied topical items such as lip balm and basic skin lotion. Please apply sunscreen at home.
- I give permission for my child to participate in walks within the surrounding area accompanied by designated staff members.

**MY SIGNATURE ACKNOWLEDGES MY UNDERSTANDING OF AND AGREEMENT TO THE ABOVE.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

