



## **After School Program 2019 - 2020**

September 2019

Dear Parents,

Saint John's offers an after school program. The student must be registered in the program to attend. This is a school activity and students must follow all school policies. Special "KidsChoice" after school programming is also available for a separate registration fee that will run from October through May during aftercare hours. Additional information and registration form about this program will be provided separately.

### **Time:**

The program runs daily from 2:40 PM until 6:00 PM. On days when there is early dismissal the program begins at 12:00PM and lunch will be served.

### **Dismissal and Pick- Up**

Students will be released ONLY to a parent or a person designated specified in writing by the parent on the registration form.

Students must be signed out daily by a parent or the adult specified by the parent.

**Any child picked up AFTER 6:00pm will be charged a \$25 late pick-up fee.**

**If late pick up from the after school program occurs more than 5 times the student will be released from the program effective immediately. Arrangements will then need to be made for pick up during regular school day dismissal times.**

This program is supervised by the After School Program Director and the principal. The principal reserves the right to make any necessary changes to the program and cancel the afterschool program day at any time. Instances of this may occur during poor weather conditions, special school events, and/or professional development days.

This program has two components:

#### **1. Homework Help**

Homework help is given everyday. However, parents are still required to check their child's homework and sign it everyday to ensure that it is complete and accurate.

#### **2. Recreational Activities**

Sports, games, etc.

### **Cost**

- Registration fee - \$25 per child (cash)
- \$260 per month per child /1<sup>st</sup> child
- 10% discount for each sibling
- All billing through SMART
- \$25 emergency fee (need help for a day) payable next morning in cash.

Program Begins : **September 9, 2018**

Program Ends: Expected last day will be **June 16, 2020**

**After School Program 2019-2020**  
**DAILY RATE**

We're going to begin the Daily Rate for the after school program beginning September 9, 2019.

**This will be for new applicants only. This is a method for parents who do not require afterschool programming on every day of the week.**

If you are not currently enrolled in the **MONTHLY** based after school program you may sign up for the **DAILY RATE**.

If you do sign up for the **MONTHLY** Afterschool Program please be advised if you choose the Daily Rate later on in the school year this is a **onetime only** change for the year. (Once you switch to daily you **CANNOT** switch back to monthly)

The program runs daily from 2:30pm until 6:00 pm.

On days when there is early dismissal the program begins at 12:00 pm and lunch will be served.

Students must be signed out daily by a parent or the **adult** specified by the parent.

**COST:**

- Registration Fee      \$25 per child
- Daily Rate              \$30 per child - \$35 for half day
- for 2 children          \$45                      - \$50 for half day
- For 3 children          \$60                      - \$65 for half day

Sincerely,

Mrs. Melissa M. Moore ADV. CERT. SBL/SDL, MS ECEd  
Principal



## St. John School Aftercare Program September 9, 2019 until June 16, 2020

Child's Last Name		Child's First Name			
Child's Date of Birth	Grade:	Teacher's Name:	Home Phone		
Home Street Address		City	State	Zip Code	
Mother's Name		Mother's Email			
Mother's Business Phone		Mother's Cell Phone			
Father's Name		Father's Email			
Father's Business Phone		Father's Cell Phone			

In Case of Emergency and Parents are Not Available, Contact:

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**\*\*Person(s) authorized to pick up child from After School other than the previously named parents/guardians and their relationship to family:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

### Medical Information

Is your child under medical care or taking any medication(s)?  Yes  No

**If yes, please check all of the following conditions that your child has and indicate if medication needs to be dispensed at school.**

<input type="checkbox"/> Bee Sting Allergy	<input type="checkbox"/> Epi-pen	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other Allergies _____
<input type="checkbox"/> Asthma	<input type="checkbox"/> Inhaler	<input type="checkbox"/> Yes <input type="checkbox"/> No	Special Needs: _____ _____
<input type="checkbox"/> Vision/Hearing	<input type="checkbox"/> Glasses	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Other _____			

Additional concerns counselors should be aware of: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Family Health Care Information

Physician's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Insurance Name: \_\_\_\_\_ Health Insurance Number: \_\_\_\_\_

Please provide copy of the insurance card

In case of an emergency, I give permission to the appropriate personnel to properly transport my child to a medical facility for care.

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

**Parents will notify St. John Program in writing of any changes in family addresses, telephone numbers and emergency contact information.**

Name of the Person Completing this Form: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

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

**Important: NO CHILD WILL BE DISMISSED TO ANY PERSON OTHER THAN THOSE LISTED ABOVE, UNLESS WE RECEIVE A WRITTEN PERMISSION FORM.**

By signing, I hereby agree to the terms of the After School Program contract.

Parent/Guardian Name: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Approved By: \_\_\_\_\_