

SAINT MARY-SACRED HEART SCHOOL

After School for Kids

Before and After School Care Programs 2020-2021

Dear Parents,

Welcome to the ASK Program! Our extended care program includes both before and after school care for our students. Please carefully review the following information and forms.

If your family will be using either the before and/or after school care programs this year, please review this information, complete the application forms, and return all forms to the main office by **Thursday, August 20, 2020.**

Please note that the running of this program is subject to enrollment. We require a minimum number of students per day in order to operate the ASK program daily. This is due to our cohort model. Your timeliness in returning the completed application forms is greatly appreciated!

Sincerely,

Charlotte Lourenco Principal

Before and After School Care will start on Monday, August 31.



(Before and After School Care Programs)

Philosophy

The **ASK For Fun Program** is an extension of our school day program and incorporates the same mission of providing a quality Catholic education for our students. The program will strive to create opportunities that will challenge each child to develop his/her personal potential in a Christian community.

Goals

The program will: Follow new Covid-19 social distancing guidelines and mask wearing.

Provide a safe, encouraging environment for children needing before and/or after

school care in a familiar setting.

Schedule appropriate physical activities, quiet study time, and enrichment activities

for all participants to enhance the regular school day experience.

Allow for interaction with other children and adult caregivers to help foster a sense

of community. While practicing social distancing.

Admission Policies

The **ASK For Fun Program** is available to St. Mary-Sacred Heart School students. Students in any grade level may be enrolled in either or both the before school and after school portions of the program. An application and all necessary paperwork must be submitted for any of these enrollment options for each participant.

The **ASK For Fun Program** is a voluntary program available to families who need extended care for their children either before or after the normal school hours. In order to ensure the safety of all participants, parents and students must follow the program's established rules and regulations in order to continue in the program.

There will be a \$30 registration fee per child (\$20 for second child in a family with a \$50 maximum per family). This fee will be used to help fund the program's materials and equipment costs. This fee will be added to your billing statement on August 31st.

Program & Schedule

The *ASK For Fun Program* is available on full school days **ONLY**. Before school care will be provided from 8:00 AM to 8:40 AM each day. After school care will be provided from 3:15 PM to 6:00 PM each day. Participants may use the before school portion of the program (8:00 AM to 8:40 AM) on an "as needed" basis. Any student who arrives at school prior to 8:40 AM will be placed in the program for that day for proper supervision and to ensure the student's safety (unless the student has a pre-arranged activity like academic assistance from a classroom teacher). Parents will be billed accordingly.

Participants in the after school portion of the program <u>must be signed up for a specific cohorts or day of week.</u> The program coordinator must be given at least one week notice of any changes to a participant's schedule so that appropriate staffing changes can be made if needed. <u>Parents will be billed for original schedule for the one week (based on cohort) following notification of change, whether the student attends the program or not.</u>

Fees may be paid weekly to the program director by check (payable to St. Mary-Sacred Heart School) on a regular basis. Delinquent accounts can result in dismissal of a child from either before or after school program. Regular, prompt payments will assure the continued employment of personnel and provision of supplies as well as the success of the program. Due to the staffing requirements for the after school care program, deductions or credits to an invoice or substitutions in days may not be taken if a child cannot attend his/her regularly scheduled afternoon due to illness or other activity.

(Before and After School Care Programs)

Fees are as follows:

Service Provided	Per Day	Per Week
Before school care (any arrival between 8:00 AM and 8:40 AM)	\$7.00	\$35.00
After school care (any portion of time between 3:15 PM and 4:44 PM)	\$12.00	\$60.00
Extended After school care (any pickup between 4:45 PM and 6:00 PM)	\$22.00	\$110.00
After school care on a half-day of school (any portion of time between 12:00 and 6:00 PM)** <i>If you commit to using our after school care on a</i>	\$35.00	n/a
half day you will be financially responsible for this \$35 fee regardless of the amount of time the child attends.)		
Late fee for pickups after 6:00 PM (Note: Fee is for every 15 minutes or portion thereof.)	\$15.00	n/a

The before school care session will be held in a designated location near the main office. Students will have the opportunity to work on assignments if needed. Individual games will be assigned to a student; then sanitized between uses. Weather permitting, students will go outside for outdoor play on the playground from 8:30 AM to 8:55 AM. All students will be lined up for entry into the school at 8:55 AM.

This years after school care session will follow this schedule:

3:15 – 3:30 PM	Snack outside weather permitting
3:30 – 4:45 PM	Outside; space for homework and play.
4:45– 6:00 PM	Miscellaneous activities indoors with social distancing observed.

(Before and After School Care Programs)

Important Reminders

An authorized adult must sign out each student when he/she is picked up. Each adult authorized to pick up a student will have a Personal Identification Number (PIN) assigned to him/her. Please be sure to provide us with a complete list of authorized adults so that a PIN can be generated and assigned to each one. Do not share your PIN with any other person. The PIN used to check out a student will record the name of the adult who is picking up the child. We need to be notified in writing of any changes in the people who have your permission to pick up your child. We will not release any child to a person who is not authorized and please advise anyone who is picking up your child that he/she may have to show us a picture ID if we do not recognize the adult.

All students must be picked up by 6:00 PM. Families will be charged an additional \$15 for every fifteen minutes (or portion thereof) that a child remains with us after that time.

Requests for changes to a child's after-school care schedule must be submitted in writing at least one week in advance. This allows us to ensure that proper staffing can be arranged. Days may not be substituted if missed due to absence, etc.

Weekly bills for services provided will be emailed on Wednesday. Payment is due upon receipt. Please feel free to send in a note to the attention of Shawn Sweet, our Extended Care Coordinator, regarding any questions regarding the billing. In order to meet the payroll for this program's staffing, your prompt payment is greatly appreciated.

Students should not bring any toys, games, personal belongings, etc. to school. Both extended care programs will provide activities and games for the students. Students may bring their own snack or drink if they wish, but the program will always provide a snack and drink during the after-school program.



(Before and After School Care Programs)

Application Form 2020-21

Child(ren)'s Name(s) and grades as of Augus	ı t ·
ormation) a realite(s) and grades as of Adgus	
Parental/Guardian Information:	
Father's Name	Home Street Address
	City, State, Zip
	Home Phone
Mother's Name	Home Street Address (if different)
	City, State, Zip
	Home Phone (if different)
Does child(ren) live with both parents: Yes ☐ No ☐	
If no, is there a restriction on which parent ca Yes ☐ No ☐	n pick up child(ren)?
If yes, please explain and also be sure that th any restraining orders, custody agreements, e	• •



(Before and After School Care Programs)

Enrollment Information:

Before School Care: Please register my child(ren) for before school care allowing me to drop_my child(ren) off at or after 8:00 AM. I understand that this program is considered an "as needed" (drop in) program. My child(ren) will be considered in attendance and billed for this program only if their arrival time is prior to 8:40 AM. Days of anticipated participation:
MondayTuesdayWednesdayThursdayFriday
As needed.
After School Care: Please register my child(ren) for after school care on the day(s) indicated_below. I understand that this is a commitment to reserve this slot and that we will be billed whether or not the child is in attendance (this is not an "as needed" program). I also understand that a one week notice of any changes to this schedule must be given in writing to the office (Attn: ASK Coordinator). Days of the week to reserve for my child(ren) are:
☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday
Please return by August 20, 2020. Space is limited and applications will be accepted on a firs

come, first serve basis.



(Before and After School Care Programs)

Policies and Rules Agreement

Please review the following policies and rules and sequences registration form. The ASK Program staff members we the program during the first week of school as well.	
☐ Homework is encouraged to be completed during the a no homework then the student may read a book silently.	ssigned time (3:30 to 4:15 PM). If a child has
☐ All students will stay with the group during the physical behind in the office to complete homework. If a student complete homework, then the child can be given a clipte the playground or in the church hall.	needs additional time after 4:15 PM to
☐ If a parent arrives later than 6:00 PM for pick up, the minutes that a parent is late on the weekly bill. Please you know you will be late due to traffic, etc. in order to a	have the courtesy to contact the ASK staff if
☐ Behavior is expected to be appropriate as outlined in the before and after school care sessions. The ASK Prostudent from the program if inappropriate behavior becomes	ogram staff reserves the right to dismiss a
Dans of Oiss of the	
Parent Signature	Date



(Before and After School Care Programs)

	ASK Participant #1	ASK Participant #2
Child's Name		
Date of Birth		
Physician's Name		
Physician's Address		
Physician's Phone Number		
Health Insurance Coverage		
Policy Number		
Name of Policyholder		
Allergies (Please feel free to attach additional information as necessary.)		
Chronic Health Conditions (Please feel free to attach additional information as necessary.)		
Special Dietary Restrictions (Please feel free to attach additional information as necessary.)		

First Aid and Emergency Medical Care Authorization and Consent Form

The Data Verification Forms submitted by parents which are on file in the school office will be used for emergency contact information for parents and trusted others.

I understand at least one or more of the staff members in the ASK Program is trained in the basic of first aid and I authorize them to give my child first aid when appropriate. I also understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child. However, if I cannot be reached, I hereby authorize the program to transport my child to the nearest medical care facility and/or to				
Parent Signature	Parent Name (Printed)	Date		



(Before and After School Care Programs)

Each student application will be issued their own PIN in addition to adults listed below. (If no one is authorized, please indicate below by writing "NO ONE.")

Name & Address			Relati	onship	Phone	Number(s)
Any changes to the chove list of	outhorizo	d adulta m	uet he etetee	l in writing	a and will be	maintainad
Any changes to the above list of					-	
in the child's file. The permission	is valid to	or one prog	gram year fro	m the da	te of signati	ure.
Parent Signature	Parent Signature Parent Name (Printed) Date			Date		
Parent Signature	Parent Na		iii ivaiiie (Fii	ame (Fillieu)		Dale
Additional Information						
	ASK Participant #1			ASK Participant		
Information Requested				#2		
Child's Name						
Child's Name						
Special Interests						
•						
Highest Authorized Movie		5.0	50.40		DC	DO 46
(Please circle)	G	PG	PG-13	G	PG	PG-13

Other information you would like us to know about your child(ren)