

EXTENDED DAY PROGRAM
OF
ALL SAINTS CATHOLIC SCHOOL
2018-2019

Our Extended Day Program is staffed by faculty members of All Saints Catholic School.

Hours for the Program

Regular Days 2:00 – 5:45 PM

Half Days 11:45 – 5:45PM

Program:

Homework Time	Free Play	Science Park
Story Time	Snack	Organized Activities

Fee/Payment Procedures:

	Daily	Mon – Friday
1 Child	\$25.00	\$ 100.00
2 Children	\$45.00	\$ 155.00
3 Children	\$65.00	\$ 190.00

There is a \$12.00 daily charge for children who participate in the extended program for one hour. Any child who stays later than **3:15PM** will be charged the daily rate.

Payment will be made on a weekly basis unless other arrangements have been made with the coordinator.

A **\$5.00** late fee will be charged for every five minutes a child stays beyond the closing time of **5:45PM**. Continual lateness may necessitate the exclusion of your child from the program.

Pick-up Procedure:

When picking up your child please use the **front entrance only**. Please ring the bell and you will be buzzed into the building. Please stop in the main office to sign in, then proceed as usual to the after school room to sign your child out. The child must be signed out by the adult who is picking up. At 5:35PM, all children remaining will be brought to the front entrance of the school.

Calendar of Program:

The program will be held on each school day and on each half day that the school is in session. There are a few exceptions including November 23rd and December 23rd. On days of early dismissal due to inclement weather after school will not be held. Please be prompt and arrive at school by 11:45am.

Registration Form:

A registration form are available online. Please complete it and return it as soon as possible.

Snack: Please be sure to send in a healthy snack on the day he/she will be attending the after school program. (Snack **WILL NOT** be provided)

**ASCS EXTENDED DAY PROGRAM
REGISTRATION FORM
2018-2019**

Date: _____

Child's Name: _____ Grade: _____ DOB: _____

Address: _____ City: _____ Tel: _____

Mother's Name: _____

Mother's Employer: _____ Work Tel: _____

Father's Name: _____

Father's Employer: _____ Work Tel: _____

Who should be contacted if neither parent can be reached in an emergency?

Name: _____ Tel: _____

Relationship: _____

Other than the names above, who may pick up the child?

1. _____ Relationship

2. _____ Relationship

3. _____ Relationship

Allergies, chronic conditions, health problems

Please list any other information that may be helpful to school

I have read the after school program information.

Parent Signature

Date