

OUR LADY OF GRACE CATHOLIC SCHOOL BEFORE & AFTER SCCHOOL PROGRAM



Our Lady of Grace Catholic School
1734 Bower Hill Road
Pittsburgh, PA 15243
School Office Phone: 412-279-6611
School Office Hours: 8:00 AM - 3:15 PM

Mrs. Sharon Loughran Brown
School Principal & BASP Director
sbrown@olgscott.net

Before School Program Hours: 7:00 AM - 9:00 AM
After School Program Hours: 3:00 PM - 6:00 PM

Dear Parents/Guardians,

Welcome to OLG's Before & After School Program (BASP). The program is available to our students enrolled in our 4 Year Full Day Preschool through 8th grade. The Before School Program is available from 7:00 AM - 8:30 AM (until 9:00 AM for 4 Year Preschoolers) and the After School Program is available from 3:15 PM - 6:00 PM (starting at 3:00 PM for 4 Year Preschoolers), Monday - Friday when school is in session. The program begins on the first FULL day of school and ends on the last FULL day of school. The BASP is closed on school vacations, holidays, snow days, and for any unforeseen emergency that would close OLG School. In case of snow delays, the Before School Program will be delayed the same amount of time as the school day. The After School Program is not available early dismissal days.

The purpose of our BASP is to provide safe, convenient, affordable care to our families within a Catholic structured environment. Students will have the opportunity to work on homework, relax, and participate in recreational and enrichment activities. Our program is supervised by certified OLG staff under the direction of our school principal, Mrs. Sharon Loughran Brown.

There is a \$25 Annual Registration Fee that must be paid per family every year. The hourly fee schedule is listed in the BASP Agreement and Guidelines.

For the After School Program - all students must be picked up by 6:00 PM. There is a late pick-up charge of \$1 per minute after 6:00 PM. Too many late pick-ups may result in your child's dismissal from the program.

New this year, (depending on the number of students) the preschoolers will use a separate room for the After School Program.

To participate in the BASP, you need to do the following:

- ◆ Read the BASP Agreement and Guidelines
- ◆ Complete, sign, and submit the registration form with completed emergency information
- ◆ Pay the \$25 Annual Registration Fee
- ◆ Fill out and submit the Program Attendance Calendar on a monthly basis

Students should abide by the same rules set forth by the school for the regular school period.

If your child is involved in an after school sport or activity, and you intend to send them to the After School Program after the sport or activity, you must indicate that in the Monthly Reservation Form or send a note or email to the school so that the BASP staff know when to expect them to arrive in the After School room. Also, it is your responsibility to let the coach or teacher know that your child will need to go to the BASP room after the sport or activity. **When the last child has left the After School Program for the evening, the staff leaves as well, no matter how early it is, unless we know that another child is arriving late because of a sport or activity.**

Billing statements are sent at the beginning of every month for the previous month. The due date will be on the bottom of the invoice. If you have a special circumstance, such as bills need to be sent to a specific parent, please let us know as soon as possible. **If the invoice is not paid and payment arrangements have not been made by the due date, your child will not be allowed to attend the program.** Please be prompt with payments.

Parents and children are to enter and leave through the side entrance of the school (door #2) closest to the church. The doors will be locked so please ring the button on the left side of the doors once and we will disengage the lock. There will be no beep or sound, so just give us a minute then pull on the right side door to gain entry. Go up the staircase to the first door on the left – room 202. **Parents must come up to the room to pick up their children and sign them in/out for the day.**

Sincerely,

The OLG Before & After School Program Staff

OUR LADY OF GRACE BEFORE & AFTER SCHOOL PROGRAM AGREEMENT AND GUIDELINES

1. I will complete and submit the Before & After School Attendance calendar each month by the due date. Calendars can be picked up at the BASP Room and can also be found on the school website.
2. I understand that I will be billed at the beginning of the month, for the previous month's usage. I also understand that payment must be submitted by the due date listed on the invoice.
3. I understand that services can be suspended for lack of payment, discipline problems, and violation of any school handbook policies. The BASP is considered an extension of the Our Lady of Grace School day.
4. I understand that the BASP fees are as follows:
 - \$25 Annual Registration Fee must be paid by all families
 - Kindergarten - 8th Grade Fee Schedule**
 - \$6.00 per hour for one (1) child
 - \$10.00 per hour for two (2) children of the same family
 - \$12.75 per hour for three (3) children of the same family
 - 4 Year Preschool Fee Schedule**
 - \$8.00 per hour for one (1) child
 - \$11.00 per hour for two (2) children of the same family
 - \$13.50 per hour for three (3) children of the same family
5. I will pick up my child(ren) no later than 6:00 PM. After 6:00 PM, an additional fee of \$1/minute will be charged.
6. I will complete the enclosed **Registration Form including all emergency information** and return it to school before my child(ren) begins the program.
7. I will drop off and/or pick up my child(ren) in room #202 and I will sign them in and/or out each time I drop them off and/or pick them up. Please use the BASP entrance (door #2). Push the button to the left of the door to gain entrance. Please be patient.
8. The BASP will be available for every **FULL DAY** of school. **The After School Program is not available on early dismissal days.**
9. The BASP will be **closed** due to:
 - a. Problems with the building
 - b. School closing due to weather
 - c. Emergency situations
10. I will provide a nutritious, NUT-FREE snack for my child(ren) to enjoy while at the Before or After School Program. **The BASP does not provide snacks to students.** Due to liability issues, NO food will be given to students. Students must bring their own snacks.
11. I understand that if the school operates on a delay, the Before School Program opening time will be delayed the same amount of time. (Ex. If the school has a 2 hour delay, the BSP will begin at 9:00 AM.)
12. I understand that if school dismisses early due to inclement weather, the After School Program will be cancelled. If school does not dismiss early but the weather deteriorates after 2:15 PM, it may be necessary to close the program for that day. Parents/guardians will be notified.
13. I understand that only the people listed on the registration form will be allowed to pick up my child(ren). If someone other than those persons listed will pick up my child(ren), I will send a note to school notifying

the BASP staff who will be picking up my child(ren). I will also notify the person picking up my child(ren) that they will be asked to show a form of ID when they pick up my child(ren).

14. I understand that in accident cases that appear to be minor, first aid will be administered. In more serious cases, a staff member will make all efforts to contact the parent/guardian to come and pick up the child. If a parent/guardian cannot be reached, other persons listed on the registration form as emergency contacts, will be notified. In extreme cases, the child will be transported to St. Clair Hospital, unless another hospital is indicated on the registration form.
15. I understand that NO MEDICATIONS WILL BE ADMINISTERED during BASP hours. (Rescue medications such as an Epi-Pen and inhalers will be used if provided by the parent/guardian in case of an emergency.)
16. I understand that if my child becomes ill while at the BASP, I will be contacted and will pick up my child. I also understand that if my child leaves school due to illness, he/she is not permitted to come back to attend the After School Program on that day.
17. I understand that the behavior expectations are outlined and should be followed as provided in the General Rules and the Discipline Code sections of the Our Lady of Grace School Parent/Student Handbook. Students are expected to respect the staff, each other, and the environment provided for them.
18. I understand that any infraction of the BASP rules can result in complete dismissal from the program.
19. In the event that there is a change for my child(ren)'s attendance at the After School Program on any given day, I will contact the School Office by 2:30 PM or if known in advance, I will send a note to the office. **Should someone other than the parent be picking up a child(ren) on any given day, a note or email of permission MUST be sent to school for the teacher and the BASP. That person should have an ID available to show the BASP staff.**
20. I understand that the Before & After School Program reserves the right to amend this handbook. Parents/guardians will be notified in writing if changes are made.

BEFORE & AFTER SCHOOL PROGRAM GENERAL RULES:

- ✓ Stay in the program area - no leaving any room without the permission of one of the BASP staff members.
- ✓ No running inside.
- ✓ Listen to the BASP staff.
- ✓ Respect the BASP staff and each other. ***Bullying is not tolerated at any time. Student(s) guilty of such behavior will be suspended/removed from the program.**
- ✓ No verbal abuse or profanity.
- ✓ No hitting, kicking, fighting, etc.
- ✓ Students are responsible for cleaning up after themselves at all times.
- ✓ All students and staff **must wash their hands after using the restroom.**
- ✓ School classrooms are off limits to everyone.
- ✓ When in the program area, do not touch materials, books, etc. that are not your property.
- ✓ Toys from home are permitted, but are not the responsibility of the BASP. Electronic games are allowed only if the content is acceptable for all ages. If a game is not acceptable, it will be confiscated and your child will no longer be allowed to bring the game to the BASP.



**OUR LADY OF GRACE CATHOLIC SCHOOL
BEFORE & AFTER SCHOOL PROGRAM REGISTRATION FORM
2018 - 2019 SCHOOL YEAR**

(1) Student's Name: _____ Grade: _____

Health Problems/Medications: _____

(2) Student's Name: _____ Grade: _____

Health Problems/Medications: _____

(3) Student's Name: _____ Grade: _____

Health Problems/Medications: _____

Parent(s)/Guardian(s) _____

Home Phone _____

Work Phone: _____

Cell Phone: _____

Address: _____

Email: _____

Please provide your email address as invoices are sent electronically on a monthly basis. If you would rather have a paper copy sent home, please check the box to the right.

Please tell us who will regularly pick up your child(ren) if someone other than the 2 people listed above:

NAME	RELATIONSHIP	PHONE NUMBER

****Please note that anyone picking up your children will be asked to show a valid ID.****

In the event of apparent serious illness or accident, when the parent/guardian cannot be reached, YOU authorize one of the following people to be notified by phone. These people listed below are authorized to act in your absence and have your authorization to release your child from the BASP into their care.

NAME	RELATIONSHIP	PHONE NUMBER

Please note: In the event of an emergency, EMS will be contacted immediately for assistance. Parent/emergency authorized person will then be notified. The child will be transported to St. Clair Hospital if necessary. Should you NOT want your child transported to St. Clair Hospital, please indicate your hospital of choice below:

Please initial on the left that you have read and understand the following:

_____ I have read and understand the OLG BASP Agreement and Guidelines, and have discussed these with my child(ren).

_____ I have completed all necessary emergency information and will advise the BASP staff should any changes be necessary throughout the school year.

_____ I will complete a monthly reservation calendar and submit it on time for the months that my child will be using the BASP.

Parent/Guardian Signature: _____

Print Parent/Guardian Name: _____

Date: _____

FOR OFFICE USE ONLY:

Date Received: _____ Amount: \$ _____ Cash/Check #: _____ Rec'd By: _____