



**BEFORE & AFTER SCHOOL CARE PROGRAM  
HANDBOOK & REGISTRATION  
2019–2020**

***NEW FOR 2019-2020:  
One-Hour BEFORE CARE  
And Hourly Rates  
(See Item #7)***

Dear Parents,

Welcome! St. Therese School is pleased to once again offer a quality After School Care program for our students in grades Kindergarten through 5th whose parents work past normal school hours. After School Care is held in the auditorium of the school and provides professional child supervision in a structured program of both recreation and study time. In addition to After Care, we will also offer *one hour* of Before Care, held in the 2<sup>nd</sup> grade classroom.

This handbook has been designed to address all issues relating to our Before & After School Care programs. As we continue to fine-tune our programs, we welcome your comments and suggestions so that this will be an enjoyable experience for both you and your child.

Sincerely,  
Mr. Timothy Dunnigan, Principal

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## **BEFORE & AFTER SCHOOL CARE INFORMATION**

**1. DRESS AND SNACKS:** (After School Care) Immediately after dismissal, students may change into **play clothes**. Please make sure that your child has clothing that they can dress themselves in, as the school personnel cannot assist your child in dressing. If you would like your child to have a snack, please send one in with them as **snacks will not be provided**. Also, **please do not send in any group snacks for birthdays, holidays, etc.** The only snacks allowed are those your child brings in for him or herself. *Please remember that our school, including After School Care, is “nut-aware”.*

**2. PLAN:** (After School Care) There will be an outdoor play time, weather permitting, followed by study time for those students with written homework. Our After School Care staff **are not tutors** but they may give your child some help if the student requires it. Free time for board games, coloring and other play activities will follow until parents arrive. *Children should NOT bring in games, electronic devices, or other toys from home as they may get lost or broken., The school cannot be held responsible for lost or damaged items.*

**3. HOURS:** After School Care hours are from 2:30pm-6:00pm, Monday through Friday on full days and 12:00pm-6:00pm on half days. Before Care hours are from 6:30am-7:30am, Monday through Friday, **NOT available in the event of a delayed opening.**

**4. PICKUP:** (After School Care) When picking up your child, please enter the front door of the school. You must sign your child out before leaving and only a person authorized on your registration form will be permitted to pick up your child. Children may not leave the building alone. Your child's health and safety are paramount, and it is crucial that all parents and guardians adhere to these guidelines.

**5. BEHAVIOR:** Children are expected to respect the staff, students, and materials. Improper or dangerous behavior may lead to expulsion from the program by the Principal.

**6. HALF DAYS:** (After School Care) On half days, **children must bring their own lunch with them.** We would also recommend that they bring an extra snack for later in the afternoon.

## **7. REGISTRATION, FEES AND PAYMENT:**

• **REGISTRATION:** *To utilize the Before and/or After School Care program whether on a regular-basis or as a “drop-in”, REGISTRATION is required.* A Registration Fee of **\$10.00 per child** is due with the attached Registration and Emergency Contact Forms.

• **BEFORE CARE FEE PER STUDENT: \$5.00 (6:30am-7:30am)**

• **AFTER CARE FEE PER STUDENT: \$5.00 per hour OR**  
**2:30pm-6:00pm on full days = \$15.00**  
**12:00pm-6:00pm on half days = capped at \$20.00**

**\*FAMILY AFTER CARE (TWO OR MORE STUDENTS) is capped at \$20.00\***

• **PAYMENT:**

**Regular Basis: Due in full at the end of each week.**

**Drop-In: Due when picking up your child(ren).**

***Please NOTE that the hourly fee applies to 60 minutes.***  
***Over 60 minutes yields an additional hourly fee.***

All payments should be made by check, payable to “St. Therese After School Care”.

**8. ILLNESS:** In the event of student illness, parents will be expected to make provisions for taking their sick child home. Unique or special instructions should be indicated on the health form. Should an illness or other emergency arise, **we MUST be able to contact you/alternate persons that you have authorized to pick up your child.**

**9. WITHDRAWAL:** If you have been using the program on a daily basis and decide to withdraw your child for any reason, ***please notify the office at least one week in advance.*** The office will then notify the Staff.

**10. CONFIDENTIALITY:** **Please do not discuss homework problems, school or family problems with Before & After School Care personnel. Call or make an appointment with the teacher or Principal. Confidentiality is extremely important.**

**Please complete the following two forms to Register for our Before and/or After School Care Program and return to the school office with your Registration Fee(s) prior to the first day of utilizing the Program.**

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Thank you and we look forward to seeing you and your children in our Before & After School Care Program this school year!

**ST. TERESE SCHOOL  
BEFORE & AFTER SCHOOL CARE PROGRAM 2019-2020  
EMERGENCY FORM**

1st Child: \_\_\_\_\_ Grade \_\_\_\_\_

2nd Child: \_\_\_\_\_ Grade \_\_\_\_\_

3rd Child: \_\_\_\_\_ Grade \_\_\_\_\_

4th Child: \_\_\_\_\_ Grade \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Mother Cell #: \_\_\_\_\_ Mother Work #: \_\_\_\_\_

Father Cell #: \_\_\_\_\_ Father Work #: \_\_\_\_\_

**PERSONS AUTHORIZED TO PICK UP CHILD(REN) from AFTER CARE:**

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

Tel/Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

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

Tel/Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Usual Pickup Time: \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Phone #: \_\_\_\_\_

Child's Dentist: \_\_\_\_\_ Phone #: \_\_\_\_\_

**ALLERGIES OR OTHER MEDICAL NOTES:**

\_\_\_\_\_

\_\_\_\_\_

**ST. THERESE SCHOOL  
BEFORE & AFTER SCHOOL CARE PROGRAM 2019-2020  
REGISTRATION FORM**

**FAMILY NAME:** \_\_\_\_\_

**1st Child:** \_\_\_\_\_ **Grade** \_\_\_\_\_

**2nd Child:** \_\_\_\_\_ **Grade** \_\_\_\_\_

**3rd Child:** \_\_\_\_\_ **Grade** \_\_\_\_\_

**4th Child:** \_\_\_\_\_ **Grade** \_\_\_\_\_

**SELECTED BEFORE CARE DAYS (REGULAR BASIS):**

Monday  Tuesday  Wednesday  Thursday  Friday  FULL WEEK

**SELECTED AFTER CARE DAYS (REGULAR BASIS):**

Monday  Tuesday  Wednesday  Thursday  Friday  FULL WEEK

We will utilize BEFORE & AFTER CARE on a Variable basis.

**FIRST AID:** In the event of an emergency, I authorize the staff to provide any first aid care deemed necessary for my child.

**EMERGENCY CARE:** In the event of an emergency, in which I cannot be reached, the physician listed above, and the local hospital are hereby authorized to provide any emergency care deemed necessary for my child.

**HEALTH RECORD TRANSFER:** In the event of an emergency, I hereby authorize the transfer of my child's health record to the local hospital.

I hereby release St. Therese School and staff from any and all injuries that may occur while my child/children are attending the Before & After School Care programs.

**Signature of Parent or Guardian:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**REGISTRATION FEE(S): \$10.00 PER CHILD / AMOUNT ENCLOSED: \$**\_\_\_\_\_

**FORMS AND REGISTRATION FEES MUST BE RETURNED TO THE SCHOOL OFFICE BEFORE YOUR CHILD ATTENDS THE PROGRAM. MAKE CHECKS PAYABLE TO "ST. THERESE SCHOOL AFTER SCHOOL CARE".**