

## 2023-2024 SJPTGA After School Program (PLEASE REVIEW, SIGN, AND RETURN...TO VERIFY KNOWLEDGE)

The After School Program is starting its 34th year of operation this fall. All profits from the program benefit St. John Paul the Great Academy.

The After School Program is open to St. John Paul the Great Academy students, in pre-kindergarten through grade 8. With the diverse age groups involved, activities are varied to try to meet most needs. After their structured day in the classroom, After School offers children the opportunity to do homework, play, interact with their peers, and have fun.

<u>Hours</u>: The After School Program runs each <u>school day</u> from 2:00 to 5:30 p.m. On <u>scheduled</u> early dismissal days, the hours are from

12:00 to 5:30 p.m. There will be no program on snow days. WHEN SCHOOL IS CLOSED DUE TO BAD WEATHER THE AFTER-SCHOOL PROGRAM IS NOT AVAILABLE. It is the parent's responsibility to make arrangements to have their child picked up by closing time.

**Cost**: The rate for the first child is \$10.00 per child. Families with two or more children in the program pay \$9.00 per hour for each additional child. Payment should be included with the two-week sign-up sheet (\*Note: If your work schedule varies and you are not able to utilize the two-week signup sheet and prepay, payment must be made when the child is picked up from the program.) Credit is given for any time not used (early pick-ups, sick days, etc.). Statements will be issued at the end of each month verifying hours, payments, debits & and credits. Please keep in mind for the safety of your children; we cannot be distracted from watching the children to answer questions about statements. (\*note: Any questions regarding statement hours, payments, or amount owed may be directed to the director of the program via a written note.) Please keep statements for tax purposes. Balances due must be paid upon receipt of the statement. Your child will not be able to attend the After School Program until your account is current. This rule will be strictly enforced. Parents will be responsible for any bank charges incurred on returned checks.

**Tax Information:** The tax number is 06-0647036. Please request copies of your After School year-end statement for tax purposes, if needed. Statements should be kept so that additional copies will not have to be requested.

<u>Sign Up</u>: Every student attending the After School Program must have a current registration/emergency contact form on file with After School. <u>Sign-up sheets are for two weeks</u>, and payment must be included. (\*note: If your work schedule varies and you are not able to utilize the two-week signup sheet and <u>prepay, payment must be made when the child is picked up from the program.)</u> The sign-up sheets will be sent home via email every two weeks. Please return the sign-up and payment on Friday. If there is a change in your child's schedule, you must notify the school office. If you find that you need to send your child to the After School Program and did not send in the sign-up sheet, you must notify the school office in writing with payment, or if necessary, by phone (payment must then be made at pick-up time). We cannot take verbal messages from the children regarding schedule changes.

**Schedule**: Children will come to the cafeteria at dismissal. Homework time is until 3:00 p.m. and then the students have a snack. Any homework left will be finished at home. Help is given if needed, and work is checked for completion, but **it is the parent's responsibility to verify that all homework is done and to sign off on the homework sheet/notebook if required.** If the gym is not available, quiet activities will be offered to children with no homework. Additional activities will also be offered. Activities could include arts, and crafts, games, contests, movies, gym time, and outside play. All students are expected to pick up after themselves, throw out their trash after snack, put away toys, games, and books when they are done with them, and help with activity clean up.

<u>Pick Up</u>: Park in the lot behind the school, walk up the driveway to the main entrance, and ring the afterhours buzzer. <u>If we are playing outside</u>, <u>barriers will be up in the parking lot</u>; <u>for the safety of vour children</u>, <u>please do not try to drive up to the school</u>; <u>park in the driveway or on the road instead</u>. If due to an emergency, you cannot pick up your child by 5:30 p.m., you must call Mrs. Tagan at 860-605-7306. <u>There is a late fee of \$5.00 per every 5 minutes or part thereof after 5:30 p.m. in addition to the regular rate.</u>

| Misc.: Behavior and discipline problems will be handled according to the school's policy in the handled Ongoing problems could result in the loss of the privilege to use the After-School Program.  *****PLEASE NOTE ANYONE PICKING UP YOUR CHILD MUST SHOW PICTURE ID***** |       |  |  |  |  |
|--|-------|--|--|--|--|
| arent/Guardian Signature:  | Date: |  |  |  |  |
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| CHILD'S NAME             |                                      |                    | Grade        | Date |  |  |  |
|--------------------------|--------------------------------------|--------------------|--------------|------|--|--|--|
| STREET                   | CITY                                 | ST                 | ZIP          |      |  |  |  |
| HOME TELEPHONE #         | DATE                                 | OF BIRTH           |              |      |  |  |  |
| FATHER                   |                                      | E-Mail Address     |              |      |  |  |  |
| HOME ADDRESS & PHONE (   | (if different from student)          |                    | _Cell        |      |  |  |  |
| MOTHER                   |                                      | E-Mail Addı        | ress         |      |  |  |  |
| HOME ADDRESS & PHONE (   | (if different from student)          |                    | _Cell        |      |  |  |  |
| EMERGENCY NAME & NUM     | IBER IF PARENT CAN'T BE REACH        | IED                |              |      |  |  |  |
| *ALTERNATE PERSON PICK   | ING UP: (Name//Cell #)               |                    |              |      |  |  |  |
| *ALTERNATE PERSON PICK   | ING UP: (Name//Cell #)               |                    |              |      |  |  |  |
| *IN CASE OF EARLY DISMIS | SSAL (bad weather, etc.) IF DIFFEREN | NT THAN ABOVE, WHO | WILL PICK UP |      |  |  |  |
|                          | EDICAL PROBLEMS (Attach Action P     |                    |              |      |  |  |  |
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\*Anyone picking up your child should be prepared to show a valid picture ID.