

REGISTRATION - AFTER SCHOOL PROGRAM

Dear Parents:

We are once again offering the ***After School Program*** for all students in PKA and Grades 4K to 8. The program will be from 2:15 p.m. to 5:45 p.m., Monday-Friday. The ***Program*** will begin on the first day of school.

Students in the ***After School Program*** must complete their homework assignments before they can participate in other activities. They will have the opportunity to do arts and crafts, play with a variety of board games, watch videos, read, or simply socialize with their peers. All activities are fully supervised and assistance with homework assignments is available.

Healthy snacks and refreshments are provided for the children. Most importantly, the children will be within a caring, nurturing and safe environment. Due to the overwhelming response and success of last year's program, we urge you to register your child prior to the start of the 2025-2026 school year.

The cost for the ***After School Program*** is as follows:

- A monthly rate (September - May) of \$300.00 per child
- A monthly rate (for June) of \$150.00 per child or
- A daily rate of \$25.00 per child

As we have engaged FACTS to collect tuition and other fees for us, the monthly cost of the after school will be deducted on the 16th of each month beginning October 16, 2025 till June 17, 2026.

Please be advised:

- If your child is waiting to be picked up, he/she will initially sit outside of the Secretary's Office from 2:15 to 2:30 p.m. If at 2:30 p.m. the child is not yet picked up, he or she will be escorted downstairs to the after school program and the daily rate of \$25.00 will apply.
- Pick-up time is at 5:45 p.m. with a 15 minute grace period to 6:00 p.m. If the child is picked up after 6:00 p.m. an additional fee of \$15 will be incurred.

Attendance will be taken daily and billing will be done on a monthly basis.

AFTER SCHOOL PROGRAM REGISTRATION FORM

Child's Name: _____ Grade _____
(First) (Last)

Father's Name: _____ Mother's Name: _____

Home Tel.#: _____ Work # (father): _____ Work# (mother): _____

Individual(s) responsible for picking up child each day:

Name _____ Tel.#: _____

Name _____ Tel.#: _____

Pediatrician: _____ Tel.#: _____