

COVINGTON ELEMENTARY SCHOOL

2019-2020 BEFORE AND AFTER CARE PROGRAM

BEFORE AND AFTER SCHOOL CARE PHONE (985) 373-4649

Dear Parents,

Welcome to another exciting school year! Covington Elementary will be offering Before School Care and After School Care program again this school year.

WE START THE 2019-2020 SCHOOL YEAR ON Friday, AUGUST 9TH, 2019 **BUT WE WILL NOT BEGIN BEFORE OR AFTER SCHOOL CARE UNTIL MONDAY, AUGUST 12TH, 2019.** Please make arrangements for those days before the first day of school.

There is a **registration form to complete and fee** for our program per family (if more than one child attends), \$10.00 for each Before or and After Care or if your child(ren) will be attending both \$15.00.

****Before School Care 7:00-7:50am Daily**

The charge for **Before School Care is \$5.00 per day** for regular attendees and **\$6.00 for drop-in** due before they can attend that morning.

FEE Schedule for BSC:

	Full-Time	Part-Time		Full- Time	Part-Time
August 2019	15 days \$75.00	9 days \$45.00	January 2020	19 days \$95.00	11 days \$55.00
September 2019	20 days \$100.00	12 days \$60.00	February 2020	16 days \$80.00	9 days \$45.00
October 2019	21 days \$105.00	12 days \$60.00	March 2020	21 days \$105.00	12 days \$60.00
November 2019	16 days \$80.00	9 days \$45.00	April 2020	16 days \$80.00	9 days \$45.00
December 2019	14 days \$70.00	9 days \$45.00	May 2020	15 days \$75.00	9 days \$45.00

BEFORE SCHOOL CARE Program- Children participating in the BEFORE CARE program will start at 7:00am until school begins at 7:50am. Children must be **WALKED IN TO BSC CLASSROOM AND SIGNED IN by a parent and/or guardian.

****After School Care 3:36-6:00pm Daily**

The charge for **After School Care is \$9.00 a day** for regular attendees and **\$10.00 for drop-ins** due at pick-up that afternoon.

After School Care Pick-up

Pick-up will be at the back of the school, in the modular wing (1st grade building) in Room #54. You will access this area by turning off 19th Ave. onto Van Buren St. parking behind the gym. Then, you will enter through the side gate by the gym and go to the white, modular building. We will be in the first class through the double doors to the left, #54

FEE Schedule for ASC:

	Full-Time	Part-Time		Full- Time	Part-Time
August 2019	15 days \$135.00	9 days \$81.00	January 2020	19 days \$171.00	11 days \$99.00
September 2019	20 days \$180.00	12 days \$108.00	February 2020	16 days \$144.00	9 days \$81.00
October 2019	21 days \$189.00	12 days \$108.00	March 2020	21 days \$189.00	12 days \$108.00
November 2019	16 days \$144.00	9 days \$81.00	April 2020	16 days \$144.00	9 days \$81.00
December 2019	14 days \$126.00	9 days \$81.00	May 2020	15 days \$135.00	9 days \$81.00

**AFTER SCHOOL CARE program- The after school care program will start at 3:36 when school ends until 6:00pm. If you arrive after 6:00pm, there is a late fee of \$1.00 a minute for each child till picked up. Children will be marked in and must be signed out by a parent and/ or guardian. During this time, students will be offered assistance with homework, a snack and juice provided by the cafeteria (no extra charge).

"The Best School in the Whole Wide World"

You will need to make some decisions before registering for the program:

1st) Will your child(ren) be full time (5 days a week) or part-time (3 days a week)?

If you choose the part-time option, you will need to select the 3 days they will attend and this can only be changed with the director's approval. This change will need to be made at the latest the day before by letter sent with your child(ren) or email to the director.

2nd) Will I be paying monthly (no additional fee) on the 1st or Bi-monthly (with a \$5 fee with each payment) on the 1st and 15th?

If you are paying monthly, it will be due on the 1st of each month or first Monday. If not paid in full by the 3rd or the first Wednesday, your child(ren) will not be allowed to attend until paid with a \$5.00 late fee.

If you choose bi-monthly, it will be due on the 1st (or first Monday) and the 15th (Monday closest to 15th) with \$5.00 per payment fee. If not paid by the 3rd /18th (or first Wednesday after), your child will not be allowed to attend until paid with a \$5.00 late fee.

If your child is registered full time or part time, you will need to pay for the entire month even if they do not attend some days. This may sound harsh but please remember the staff is still here even if your child is not. Our program is entirely run on the fees we take in each month.

Be aware, if you have a past due balance from the previous school year, it is due the first week of school along with current balance.

Children with outstanding late fees will not be allowed to participate in the program until all fees are paid in full.

A \$10.00 service charge will be posted to your account for any NSF checks. Please put your child's full name on the memo line on checks and write separate checks for Before School Care and After School Care programs.

In order to ensure the safety of all children, every student is expected to follow the CES rules and regulations. All must adhere to these rules and regulations in order to continue to participate in the program. **Students who consistently choose to act in an inappropriate manner at Before or After School Care will not be allowed to attend.** Severe infractions may warrant immediate removal from the program.

We pledge to provide a safe and happy environment for your children before and after school each day.

Sincerely,

Candice Baham (Director)

candice.baham@stpsb.org

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BEFORE and AFTER SCHOOL CARE Registration Sheet

My child will attend: _____ Before care _____ After care _____ Both

My child will be: _____ Full-Time

_____ Part-Time (Choose 3 days : __M__T__W__TH__F)

I will be paying: _____ Monthly _____ Bi-Monthly

I have read and understand all the guidelines of the BEFORE and AFTER care programs and completed the registration sheet and paid the registration fee.

Parents signature _____

Registration fee paid _____
Date _____

Student Information-

Child's Name _____

Teacher's Name _____

Mother's Name _____

Father's Name _____

Home Phone _____ Cell Phone _____

Mother's work _____ Father's Work _____

Emergency Name and Phone _____

Names of persons who have permission to pick up your child:

Is there anyone who does NOT have permission to pick up your child? If YES, please list names and relationships to child.

Please list any allegories or other information you feel we may need to know about your child.

