2020-2021 School Year

River City Science Academy School Extended Day Program - ENROLLMENT FORM

Before School Hours: 6:45 am – 7:35 am Extended Day Hours: 2:45 pm – 6:00 pm Before School Fees: \$125 / Month & \$65 per sibling Extended Day Program Fees: \$175/ Month & \$90 per sibling Before & Extended Day Program Fees: \$250/ Month & \$125 per sibling

Office Use Only:						
Approved Date:		Approval Office	er Name:			
Application Date:	Enro	oll Date	WD Date		Re-Enroll Date	

ABOUT THE PROGRAM

Thank you for your interest in our Extended Day Program. The Extended Day Program is established to accommodate parents/guardians who are not able to pick up their students at the end of the regular school day or club time. Students in the Extended Day Program will be under supervision of an adult and will be able to read, study, and do homework during this time. The Extended Day Program is dedicated to providing academic enrichment and various activities that provide students with the opportunity to grow socially, physically, and academically.

SIGN IN/SIGN OUT PROCEDURES

Only a parent/guardian, emergency contact, or other authorized pick up person, as listed on the Extended Day Program Enrollment Form, will be permitted to remove a student from the Extended Day Program. Photo identification is required when picking up a student. If a contact needs to be updated, please notify the Extended Day Program Coordinator, and provide the contact's name, phone number, and relation to student. It is the responsibility of the person picking up the student to ensure they are SIGNED OUT daily.

EXPECTATIONS

BEHAVIOR

All students attending the Extended Day Program are expected to adhere to the policies outlined in the Student & Parent Handbook found on the school website and in the student agenda. Documentation of three disciplinary infractions will result in the student being suspended from the Extended Day Program for three (3) school days. On the fourth offense, the student will be dropped completely from the Extended Day Program. Bullying, fighting, playfighting, teasing, horseplay, and name calling will not be tolerated. Any physical altercation will result in an immediate phone call to parents/guardians and removal from the program until further notice from the Extended Day Program staff. If a student is posing a serious or recurrent behavior issue, they will be dismissed from the Extended Day Program for the remainder of the school year. If the student re-enrolls the following school year and is again dismissed due to behavior, they will no longer be permitted to re-enroll in the Extended Day Program for the remainder of their enrollment at the school.

HOMEWORK

Students are expected to bring homework assignments and reading/study materials to complete during the homework portion of the Extended Day Program. Any assignments not completed during homework time may be completed during free time, if the schedule permits.

PERSONAL ITEMS

Student bringing electronic items, cash, or sentimental items to the Extended Day Program is not encouraged. If a student brings personal belongings, the Extended Day Program is not responsible for replacement or repair of any items that may be lost, stolen, or broken. Any items left behind at the end of the Extended Day Program will be placed in the school's Lost and Found.

HEALTH

ALLERGIES AND OTHER HEALTH NEEDS

Any allergies or other special medical needs must be clearly marked on the Extended Day Program Enrollment Form. Additional details should be shared with the Extended Day Program staff prior to the student's participation. Students needing to take prescription medication will need to do so prior to the start of the Extended Day Program by visiting the school front office where the dosage will be administered and documented by the front office staff.

ILLNESS

If a student becomes ill during the Extended Day Program, the parent/guardian will be notified, and the student must be picked up as soon as possible and no later than one (1) hour after being contacted.

INCIDENTS

Should an incident occur, the student will be immediately and appropriately treated. An accident or incident report will be written and sent home. If the accident requires further attention, parents/guardians will be contacted.

EXTENDED DAY PROGRAM SELECTION: Please choose the program(s) your child will attend.

	Extended Day ONLY	Before & Extended Day	7
	Student Information		
Student #1: Last Name:	First Name:	M.I	DOB
Grade Level for 2020-2021:			
Student #2: Last Name:	First Name:	M.I	DOB
Grade Level for 2020-2021:			
Student #3: Last Name:	First Name:	M.I	DOB
Grade Level for 2020-2021:			
Complete Address:		Zip	
	Parent / Guardian Inform	<u>mation</u>	
Student Lives With:Bot	Parent / Guardian Inforn		oster Parent
	h ParentsMotherFather	GrandparentsF	oster Parent
		GrandparentsF	oster Parent
Mother Name:	h ParentsMotherFather	GrandparentsF	oster Parent
Mother Name:	h ParentsMotherFather	GrandparentsF	-
Mother Name: Father Name: Address (if different from abo	h ParentsMotherFather	GrandparentsF	-
Mother Name: Father Name: Address (if different from abo E-mail addresses: Mother:	h ParentsMotherFather	GrandparentsF	-
Mother Name: Father Name: Address (if different from abo E-mail addresses: Mother:	h ParentsMotherFather	GrandparentsF	-
Mother Name: Father Name: Address (if different from abo E-mail addresses: Mother: Father: <u>Mother Information</u> :	h ParentsMotherFather	GrandparentsF	-
Mother Name: Father Name: Address (if different from abo E-mail addresses: Mother: Father: <u>Mother Information</u> : Place of Employment:	h Parents MotherFather	GrandparentsF	-
Mother Name: Father Name: Address (if different from abo E-mail addresses: Mother: Father: <u>Mother Information</u> : Place of Employment:	h Parents	GrandparentsF	-
Mother Name:	h Parents	GrandparentsF	-

Parent permitted to remove child (check all that apply):	Father:	Yes	No	Mother:	Yes	No
IF THE ANSWER TO EITHER IS NO, LEG.	AL DOCU	MEN	TATION	MUST BE O	N FIL	E

Other persons permitted to remove my child from the Extended Day Program:

Name:	Relationship to Child:	Phone:

EMERGENCY CONTACTS

1)	Name	Relationship
	Home Phone#	Cell Phone#
2)	Name	Relationship
	Home Phone#	Cell Phone#
3)	Name	Relationship
	Home Phone#	Cell Phone#
All par	ents <u>MUST</u> complete, sign and return the inform	mation sheets along with the RCSA Extended Day Program
fee she	et.	
	Parent Signature	Date

Witness Signature

Date

<u>River City Science Academy Consent for Emergency Treatment</u>

Student Name:			
Parent / Guardian Name:			
Address:			
City:	State:	Zip:	
Home Phone#	Cell Phone	#	
Office Phone#	ext		
Any known Allergies:			
Any severe medical conditions the	e extended day care director /	/ staff should be made awa	re of:

Notify in case of Emergency if you cannot be reached:

Name:		
Home Phone#	Cell Phone#	
Name:		
Home Phone#	Cell Phone#	
If possible, the school will get your child to the	ne emergency facility you prefer; ho	owever, the student's well-being may dictate a
different facility. All information will be kep	t private.	
The emergency facility you prefer:		
Your insurance carrier:		
Address of carrier:		
Phone of carrier:	Policy Number	

Please contact the school office or extended day care director immediately if there is any change in the information given above.

Consent for Treatment

In case of accident or serious illness and the school is unable to reach me, I hereby authorize the school to contact the physician indicated and to follow the instructions. If it is possible to contact this physician, the school may make whatever arrangements necessary to provide care and treatment for my child.

In case of an accident or serious illness where immediate treatment of my child is indicated but where he/she is unable to remain at the school, the school will contact me to arrange transportation for my child. If the school is unable to reach me, I authorize the school to contact one of the persons listed on the Extended Day Enrollment Form and request them to come to the school to transport my child home.

I authorize first aid and/or emergency medical treatment for the above-named student in event of injury or illness. I realize that I am responsible for payment of the emergency medical treatment.

I voluntarily agree to expressly assume all risks which may result from the health and fitness activities or in any way related to my child participation in the extended day program.

Parent/ Guardian Signature: ______ Date Signed: ______/_____/____

General Release of Liability

In consideration for participation in the River City Science Academy Extended Day Program, the undersigned and participant (including his or her family members, representatives) agree to discharge, waive, release and hold harmless River City Science Academy and all staff members (and their respective officers, directors, employees, volunteers) from any harm, injury, property damage, or liability that may befall participant during River City Science Academy Extended Day Program.

Parent / Guardian _____

Date _____

Witness _____

Date _____

PAYMENT SCHEDULE - 2020-2021

Tax ID Number 20-5773949

<u>Please refer to your Extended Day Parent Packet for instructions for payments. Here are a few quick</u> <u>reminders of RCSA payment policies:</u>

- ✓ Payment is due on the dates which are listed below.
- ✓ A late fee of \$25.00 is assessed if not received within (3) business days of the due date.
- ✓ <u>It is your responsibility to know when payments are due</u>.
- ✓ There will be a \$1.00 per minute late fee for any child not picked up after 6:00p.m. This will be due that day or by the next school day.
- ✓ Any balances after the 10th day will result in No after school activities and Field Trips along with the termination of Extended Day services immediately.
- ✓ Receipt of this schedule is official notification of payment due.
- ✓ We are no longer able to issue year end statements. *Please retain your receipts.*
- Two discipline referrals will result in your child being suspended from Extended Day.
 On the third offense, your child will be dropped completely from Extended Day.
- ✓ If your child has any balance from the previous year, he/she cannot be enrolled into the Extended Day.
- ✓ RCSA does not have daily extended day program. However, if a child stays in extended day for any circumstances, the daily fee is \$15 per day, and due at that day or the next 3 school days. A late fee of \$25 will be assessed if not received within 3 business days.
- \checkmark If your child is not picked up by 6:00 pm, the school will contact the authorities. (JSO)
- ✓ Second and Third sibling will be eligible for 50% discount.
- ✓ There is no charge for clubs or tutoring; however, these students must be picked up at 3:45.
- ✓ If you are unable to pick up your child at 3:45 on the days they are attending club or tutoring, you must register for extended day or pay the daily rate.
- ✓ Extended Day Program Fee is not REFUNDABLE, including the hazardous weather closures.
- ✓ If you join the Extended Day Program in the middle of the session, fee will be prorated.

I have read and understand River City Science Academy's Extended Day Policies.

(1) Student Name		Grade	(2) Student Name	Grade
(3) Student Name	Grade			

Student Name		Grade
Enrollment Date	Withdrawal Date	Letter Y/N

	<u>2020-2021</u>						
Sessions	Session Payment Period	Payment Due	Late Payment	Date of Payment	CC /Cash	Signature	Receipt#
1	August 10 Contembor 4	August 10, 2020	August 12, 2020				
1	August 10 - September 4	August 10, 2020	August 13, 2020				
2	September 8 - October 5	Sept. 8, 2020	Sept. 11, 2020				
3	October 6 - November 4	Oct. 6, 2020	Oct. 9, 2020				
4	November 5 - December 8	Nov. 5, 2020	Nov. 9, 2020				
			· · · · · · · · · · · · · · · · · · ·				
5	December 9 - January 22	Dec. 9, 2020	Dec. 11, 2020				
6	January 25 - February 22	Jan. 25, 2021	Jan. 28, 2021				
7	February 23 - March 30	February 23, 2021	February 26,2021				
8	March 31 - April 30	March 31, 2021	April 5, 2021				
9	May 3 - May 28	May 3, 2021	May 6, 2021				

CONTRACT OF AGREEMENT

I have read and understand RCSA Extended Day Payment Policy and I also understand that it is my responsibility as the parent/guardian to keep up with the payment schedule and to make payments on time. I also understand that I will lose my space in Extended Day if I incur an past due balance as well as the opportunity to attend school Sponsored events such as Field trips until the balance is paid.