



Dear Extended Care Families,

In preparation for the 2016-2017 school year, enclosed please find an updated Extended Care Handbook and the following required forms:

- Emergency Medical Authorization Form (per child)
- Evening Extended Care Schedule
- Transportation form (**Due the 2nd week of school**)

Please complete and return the required forms with initial payment **no later than the first day of school**. Initial payment includes the fee schedule below plus a one-time annual registration fee. **Registration fee is to be paid regardless if using Extended Care on an as needed basis. You will also be required to buy a 10 or 20 hour sheet or your child will not be permitted in Extended Care.**

Children/hours = Care cost	Annual Registration	Initial payment due
1 child/10 hours = \$45.00	40.00	\$ 85.00
1 child/20 hours = \$90.00	40.00	\$130.00
2 children/10 hours = \$90.00	40.00	\$130.00
2 children/20 hours = \$180.00	40.00	\$220.00
3 children/10 hours = \$135.00	40.00	\$175.00
3 children/20 hours = \$270.00	40.00	\$310.00

Make checks payable to **ST. MARY'S EXTENDED CARE PROGRAM.**

Thank you,
Shelly Maloney

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Extended Care Notes

- All children must be signed into and out of Extended Care by the designated adult.
- You are required to pay the \$40.00 non-refundable registration fee **and** purchase a 10hr or 20hr sheet. Even if using Extended Care on an as needed basis.
- Many of you are parking at the end of the sidewalk by the playground. This is a Fire Lane and it is illegal to park there. Please park in the parking lot.
- Once children have been dismissed and report to Extended Care, they will not be allowed to return to their classroom or locker.
- The children are not allowed to bring **ANY** electronics to Extended Care.

Thank you for your cooperation,

Shelly Maloney



ST. MARY EXTENDED CARE HANDBOOK (440) 313-2521

ST. MARY EXTENDED CARE MISSION STATEMENT

The Extended Care Program of St. Mary School provides an alternative before and after school Catholic environment for children who attend St. Mary School. We endeavor to supplement the home environment by providing enriching educational and recreational activities in a safe, Christ-centered atmosphere.

PROGRAM GOAL

The goal of Extended Care (hereafter referred to as **EC**) is to provide a safe, affordable, organized and well planned before and after school extended care program for families of St. Mary School. Rules are stressed and good manners are encouraged. Each child will be treated as a very special individual and important part of the group. **Families may use EC before school (morning), after school (evening) or both.**

PROGRAM RESPONSIBILITIES

The St. Mary EC Program is not designed to take the place of the school or your home, rather it is meant to compliment both. It provides structured activities and free-time daily. The staff will endeavor to ensure the safety of all participants - with special emphasis on accounting for children at all times.

We are here to serve your needs and relish feedback from parents. We trust you will be happy with the program. If you should have any questions, please contact Shelly Maloney 440 285-4986.

REGISTRATION AND FEES

Registration for the St. Mary EC Program requires the following:

- An **annual registration fee** of \$ 40.00 per family (used for snacks, crafts and supplies). This fee is non refundable.
- **10 or 20 hours of pre-paid care**
- Completion of an **Emergency Medical Authorization form**
- Completion of **Evening Extended Care Schedule**
- Completion of **Transportation Form**

The prepaid hourly rate is \$ 4.50 per hour per child. **Charges are based on ½ hour increments.** For instance, care time of 10 minutes will be charged as ½ hour and care time of 40 minutes will be charged as one (1) hour.

If children are not picked up by 6:00 P.M., the following charges will be deducted from the payment record for that child:

6:05 - 6:15 - A one (1) hour fee
6:16 - 6:30 - A two (2) hour fee
6:30 - 6:45 - A three (3) hour fee etc.

A reminder will be sent when your child has eight (5) or less hours of

service remaining. Participant families will then be expected to remit payment for the additional amount of hours desired. Payments may be made directly to an EC instructor or through the school secretary. It is vitally important that your payment is timely. **Make all payments to St. Mary Extended Care Program.**

A late fee of 4.50 per day will be added to incurred negative hours. If after (3) attempts have been made to notify parents that your child is out of time, and if you owe EC for more than 5 hours, your child will not be permitted to attend till the balance is paid in full.

PARKING

When dropping off or picking up your child, please do not park at the end of the sidewalk by the playground. This is a Fire Lane. Please park in the West Parking Lot.

MORNING EXTENDED CARE (before school)

Morning EC hours are from **7:00 A.M. to 8:40 A.M.**

The Morning EC **entrance is the cafeteria door** next to the playground equipment area on the southwest side of the school. **Parents (or their authorized designee) MUST escort children to the cafeteria and sign the daily attendance sheet.**

NOTE: Milk, juice and cereal are provided. If you wish to send a sandwich baggie filled with your child's favorite cereal, bowls and spoons are on hand. A microwave and toaster are also available.

EVENING EXTENDED CARE (after school)

Evening EC hours are from **3:15-3:30 P.M. to 6:00 P.M.**

In the interest of safety and accountability, immediately following school dismissal EC instructors will sign-in each child and take attendance for the day. **At 6:00 P.M. parents (or their authorized designee) must pick-up and sign-out their children. Children will not be released to anyone who is not specifically authorized/designated by parents.**

Note: The school office closes at 4:00 P.M., the building will be locked and telephone calls will not be answered. You may contact the EC instructors via cell phone at (440) 313-2521.

No Child is permitted back to their classroom or locker after dismissal.

Snacks such as pretzels, goldfish crackers, popcorn, lemonade and water are provided. Parents may also send a snack with their child.

The **Evening EC pick-up location** is generally the school's **Side cafeteria door**, located next to the playground area (drive around to the southwest side of the school to pick-up your child). Please note the following:

Evening EC is in the gym from 3:30 till 4:00. Weather permitting we will take the children outside i.e. No Rain, Snow and above 60 degrees.

There will be days when evening EC will not have access to the cafeteria, on those days the children will be in a classroom. There will be a sign on the cafeteria door to notify you where EC is located. The walkie-talkie will also be hanging from the lower or upper hall entrance door.

It would be in your best interest to always use the school's south driveway to check and make sure the sign and walkie-talkie are not located at the lower or upper hall entrance door. That way you will avoid an unnecessary trip to the cafeteria.

PART-TIME OR AS-NEEDED EVENING EXTENDED CARE

Important: To preclude confusion and insure safety and positive control over part-time EC participants, if your child will be attending Evening EC on an "as-needed" basis, the following procedures apply:

- You must send a note to your child's teacher each day he/she will be attending unscheduled Evening EC, or

- **Place a phone call to the school office** advising them your child will be attending Evening EC.

If a child shows up at Evening EC with out a note or phone call, parents will be contacted using the phone numbers provided on the appropriate Emergency Medical Authorization form.

BEHAVIOR

Children are expected to cooperate with EC instructors, abide by all EC rules and be considerate of others. Additionally, they are expected to treat EC property, supplies and the belongings of others as they would their own. Disruptive behavior will not be tolerated and when encountered the following protocol will apply:

- Normally, if a child is disruptive, his/her parents will be notified via written warning. A maximum of two(2) written warnings will be tolerated
- A third incident will result in the child being expelled from EC for the remainder of the school year.
- In extreme cases, immediate expulsion will be considered.

HEALTH

Please inform the instructor if there are any special health needs your child may have, including food allergies. Additionally, please inform the instructor if your child uses medication of any type. **NOTE: Our instructors are not permitted to administer any medication.**

ACCIDENTS/MEDICAL TREATMENT

Note: Children will not be accepted into the EC program without an accompanying Emergency Medical Authorization form.

Authorization to provide medical assistance to children is assumed upon receipt of a signed copy of the Emergency Medical Authorization form. The form also contains contact phone numbers used to notify parents should an accident occur and/or medical treatment is required. **Note: It is vital that you keep these numbers current during the school year.**

The following procedures will apply should an accident or injury occur:

- In the case of a **minor injury**, EC Instructors will administer first aid to your child.
- In the case of a **serious accident or medical emergency**, EC instructors will summon professional help using the “911” system.

ACTIVITIES

EC activities include crafts, individual and group games, quiet time, homework and self directed activities. **All activities are strictly voluntary and will not be forced on the children.**

DRESS/ATTIRE

Normal school clothes are acceptable, but we ask that the children wear rubber soled or tennis shoes during EC to prevent accidents. We also ask that girls attired in dresses wear shorts underneath or change into pants immediately after school is dismissed. Weather permitting, **outside activities** will likely take place and it is imperative that children come to school with **seasonally appropriate clothing.**

GENERAL RULES

1. Children must stay within the bounds of the school property.
2. Children must cooperate fully with instructors and adults at all times.
3. Children may not leave the room without the permission of an instructor.
4. Teasing, name calling or inappropriate language will not be tolerated.
5. Bullying and/or hitting will not be tolerated.

Mon - Fri 3:00 P.M. thru 6:00 P.M.
Otherwise you may leave a message in voice mail.

Revised August 2016

EMERGENCY MEDICAL AUTHORIZATION

St. Mary Extended Care Program

PURPOSE-To enable parents and guardians to authorize the provision of emergency treatment for children who become ill or injured while under school authority when parents or guardians cannot be reached.

Student Name _____ Date of Birth _____ Home Phone _____
(Last) (First)

Address _____ City _____ Zip Code _____

School _____ Homeroom Teacher _____ Grade _____

Parent or Guardian (Residential) Student lives with _____

Mother _____ Work Phone _____ Cell _____ Home _____ Pager _____

Father _____ Work Phone _____ Cell _____ Home _____ Pager _____

Mother's place of employment _____ Father's place of employment _____

In situation where the parent cannot be reached the student may be released to the following:

Name of relative or childcare provider _____ Relationship _____

Address _____ Daytime Phone _____ Cell _____ Pager _____

Other name _____ Daytime phone _____ Cell _____ Pager _____

Facts concerning the child's medical history including allergies, medications being taken, and any physical impairments to which a physician should be alerted:

Allergies _____

Health Concerns _____

Medications _____

The Student may also be released to the following:

Name _____ Relationship _____ Phone _____ Cell _____

Name _____ Relationship _____ Phone _____ Cell _____

Name _____ Relationship _____ Phone _____ Cell _____

PART I OR PART II MUST BE COMPLETED AND SIGNED

PART I - TO GRANT CONSENT

I hereby give my consent for the following medical care providers and local hospital to be called:

Doctor _____ Phone _____ Dentist _____ Phone _____

Medical Specialist _____ Phone _____

Local Hospital _____ Phone _____

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for: (1) the administration of any treatment deemed necessary by the above-named doctor or, in the event the designated preferred practitioner is not available, by another licensed physician or dentist, and (2) the transfer of the child to any hospital reasonably accessible. This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery are obtained prior to the performance of such surgery.

Signature of custodial/residential parent _____

Address _____ Date _____

DO NOT COMPLETE PART II IF YOU HAVE COMPLETED PART I

PART II - REFUSAL TO CONSENT

I do not give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to take the following action:

Signature of
Custodial/residential parent _____ Address _____ Date _____

Extended Care Enrollment

School Year _____

Child's Name _____ Child's Teacher _____

Please check the following as applicable:

My child will be using *Morning Extended Care* on the following days:

Mon	Tue	Wed	Thu	Fri
_____	_____	_____	_____	_____

My child will be using *Afternoon Extended Care* on the following days:

Mon	Tue	Wed	Thu	Fri
_____	_____	_____	_____	_____

_____ My child will be using *Afternoon Extended Care* on an "as needed" basis.*

* Note: It is the responsibility of each parent(s) to notify the teacher in writing or the school office by phone whenever your child will be attending *Afternoon Extended Care*.

Transportation

Child's bus number _____

_____ My child will be a car rider

_____ My child will be a walker

Any change in transportation must be accompanied by a note to the office.

Signature _____ Date _____

