

ASSUMPTION CATHOLIC SCHOOL

O'FALLON, MISSOURI



Dear Parents,

We would like to welcome you and your children to the 2023-2024 Preschool Aftercare Program at Assumption School. We are committed to providing an enriching experience and a safe environment for our students, and their time spent in Aftercare is no exception. Our program consists of a rigorous and engaging curriculum with structured activities that are sure to interest your child. It is crucial that we have your full support in order to ensure our program is a success.

The AfterCare program will begin on Wednesday August 16, 2023

Please direct questions to Aftercare Coordinator, Mrs. Burbridge:

jburbridge@abvmtech.org

(636)240-4474 during school hours

(314)753-1211 after school hours

Hours of Operation: Aftercare will be available from 3:00pm – 5:30pm during regular school days. Aftercare will **not** be offered during holidays, ½ days or professional-development days.

Rates: Parents will be charged \$9.00 an hour, with the ability to pay by the quarter-hour (15 minutes = \$2.25). Parents will be sent an invoice at the end of each Month and can make payments out to Assumption School.

After 5:30pm, a late fee of \$25.00 will be assessed for the first minute, plus \$1.00 per minute thereafter. This is necessary to cover the overtime pay of the Aftercare facilitators.

Dismissal and Pick-Up Procedure: At dismissal students will be brought to a preschool classroom. The Early Childhood building will be locked at all times. Picking-up your child, parents will park in the main lot in front of the Early Childhood Education building, call **the number posted on the Early Childhood Door** (direct lines to the preschool rooms). We will bring your child to the front door and your child will be signed out. Parents are not allowed to go into the classroom and must stop at the front door. Please, be patient we will get your call and gather your child's belongings before coming to the door.

Snack: Please pack your child a healthy, **nonperishable**, Aftercare snack.

Toilet Trained: All children must be toilet trained in order to participate in the “Before” or “Aftercare” Program. If a child is having problems in this area the following procedures will be followed:

- 1 – 3 wetting accidents: Parents are notified
- 4 wetting accidents: child cannot attend Before/Aftercare for one (1) week.
- 3 more accidents after one (1) week of non-attendance: child cannot return until the start of the next quarter.

****In the event of a bowel accident,** the parent will be called to come to the school to change the child and clean him/her up. Due to sanitation and health guidelines, we are unable to change bowel accidents in aftercare settings.

Behavior: All children must behave in order to maintain a safe environment for all. If a child is unable to behave in a safe manor the following policies will apply:

- 1 – 3 infractions: Parent will be notified
- 4 infractions: child asked to not come to Before/Aftercare for one (1) week.
- 3 or more infractions one (1) week of non-attendance: child child cannot return until the start of the next quarter.

Issues beyond what is noted above for Toilet or Behavior Issues could be cause for an alternate before or aftercare program better suited to the child's needs.



Aftercare Registration Information
2023-2024 School Year Program Participation

Student Information

Student Name: Last _____ First _____ MI _____

Student Address: _____

City: _____ State: Missouri Zip Code: _____

Grade Level: _____ Age: _____ DOB: _____ Height: _____

Weight: _____ Gender: _____ Hair Color: _____ Eye Color: _____

Family Information - Primary Parent/Guardian

Last Name: _____ First Name: _____

Home Address: _____

City: _____ State: Missouri Zip Code: _____

Place of Business (with address): _____

City: _____ State: _____ Zip Code: _____

Email (required): _____ Primary Contact # _____

Secondary Parent/Guardian

Last Name: _____ First Name: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Place of Business (with address): _____

City: _____ State: _____ Zip Code: _____

Email (required): _____ Primary Contact # _____



Authorized Pick Ups

Permission is given for my child to be released from the program to the following individual including the above-stated parent / guardian to receive my child at the end of the day. Driver's license or valid photo ID required. Students will not be dismissed to anyone without proper ID.

Name: _____ Relationship: _____

Address: _____ Phone: _____

Name: _____ Relationship: _____

Address: _____ Phone: _____

Emergency Contact: Must provide two additional names other than parents. List in order they are to be contacted: Note: Parent / Guardian will be contacted first.

1. Name: _____ Relationship to Child: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact #: _____

2. Name: _____ Relationship to Child: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact #: _____

3. Name: _____ Relationship to Child: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact #: _____