

# ST. MATTHEW THE APOSTLE SCHOOL

## EXTENDED CARE

Extended care: 738-7053

School Office: 737-4604

We are happy to provide extended care services to our families. Please note the following procedures and regulations. Extended care is a privilege and your cooperation is required and appreciated in facilitating this service.

HOURS OF OPERATION:	COST:
Before Care (PK2-7): 7:00am-8:00am	\$2.00 per day, per child
After Care (PK3-7): 3:30pm-5:30pm	\$6.00 per day, per child
PK3 & 4 w/o sibling: 3:30pm-4:00pm	\$3.00 per day, per child
5:30pm-6:00pm	\$3.00 per day, per child

Students who will be picked up by 4:00pm must go to carpool. Any child entering after care at 3:30pm and picked up before 4:00pm will be charged \$6.00. Any child present at carpool, but not picked up by 4:00pm, will be taken to after care. Children left in after care after 6:00pm will be charged \$1.00 per minute, per child. Consistently tardy parents may be asked to make other arrangements for their child's after school care.

We ask that a registration form be filled out for each child and sent in immediately, with the \$25.00 registration fee. If you do not intend on using these services we ask that you fill out the form so that it is on file in case of emergency. You will not be charged the registration fee until you use the service.

A monthly bill will be sent home with your child at the beginning of each month. Payments should be made in the form of a check or cash and given to the school office. There will be a \$2.00 late fee for accounts that are past due. Accounts due in excess of forty-five days may result in termination of services.

All school disciplinary expectations are enforced at extended care. Failure to behave appropriately may result in disciplinary action or termination of services.

The school reserves the right to dismiss a student from the extended care program at its discretion.

The extended care program is intended to serve the needs of the St. Matthew the Apostle School community. Please help us to meet that goal by cooperating with all regulations.

Sincerely,

*Pam Ducote*

Pamela Ducote

# ST. MATTHEW THE APOSTLE SCHOOL

EXTENDED CARE REGISTRATION FORM

\$25.00 – REGISTRATION FEE PER FAMILY

\*PLEASE FILL OUT ONE FORM PER CHILD\*

CHILD'S NAME \_\_\_\_\_ GRADE \_\_\_\_\_

PARENT	NAME	CELL #	WORK #
MOM			
DAD			

MARITAL STATUS: \_\_\_ MARRIED \_\_\_ DIVORCED \_\_\_ SEPERATED \_\_\_ SINGLE

CHILD RESIDES WITH: \_\_\_ MOTHER \_\_\_ FATHER \_\_\_ BOTH \_\_\_ OTHER

ADDRESS		
CITY		ZIP CODE:
HOME PHONE		

LIST PEOPLE BELOW WHO ARE AUTHORIZED TO PICK UP YOUR CHILD.

NAME	HOME PHONE	CELL PHONE

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

[FOR OFFICE USE ONLY]

REGISTRATION FEE PAID:	YES:	NO:	DATE PAID:	CASH:	CHECK #:
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