

LAUREL NOKOMIS SCHOOL

Child Care Program 2019-2020

Hours of Operation (School days only)

Before school 7:00 am to 8:20 am

After school 3:15 pm to 6:00 pm

Arrival Procedure-before school care

Check-in begins at 7:00 am in the front office. Parent/guardian must sign student in, then student will be escorted to the cafeteria by our staff.

Pick-up Procedure-after school care

Parent/guardian on contact list will check-in at front office to sign-out student. Student will be escorted from aftercare to front office.

Child Care Schedule

Before Care: Toys, games, puzzles, arts and crafts, etc.

Students may purchase breakfast beginning at 7:45 am

After Care: 3:15 - 3:45 Program provides a nutritional snack

3:45 - 4:15 Homework, reading or educational computer work

4:15 - 6:00 educational computer games, board games, legos, puzzles, movies, playground, arts and crafts, etc.

Fee Schedule

Non-refundable registration fee per family each school year - \$25

Registration fee and one week of advance tuition is due at the time of registration.

Payments are due weekly. Pre-payment deposits are also accepted.

Accounts that become 2 weeks past due will result in suspension or dismissal from the program.

Rates are per child, per day:

Morning Care	\$ 4.00 per child
After Care	1 st child -\$8.00 2 nd child-\$7.00 3 rd child-\$5.00
After care if on reduced lunch*	1 st child-\$7.00 2 nd child-\$6.00 3 rd child-\$4.00
After care if on free lunch*	1 st child-\$6.00 2 nd child-\$5.00 3 rd child-\$3.00

*Proof of free or reduced lunch must be provided to qualify for reduced rates.

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Hours of Operation

School days only
 Before school care: 7:00 am to 8:00 am
 After school care: 3:15 pm to 6:00 pm

A late fee of \$1.00 per minute will be assessed if child is picked up after 6:00p.m.

Parent/guardian must escort and sign their child in for before care and sign them out of after care.

A photo I.D. must be presented by any person picking up a student.

Enrollment Information

A new registration form must be completed each school year with current emergency contacts, custody or medical information and documentation for special situations.

Discipline Policy

Students are expected to follow the school rules while participating in before/after care. If an infraction occurs, a staff member will discuss the behavior with the parent, and the parent must sign a warning form. Three warnings will result in a three (3) day suspension from the program. A fourth warning will result in dismissal from the program. If the behavior is deemed severe enough, suspension or dismissal can result without warning.

Fee Schedule

Non-refundable registration fee per family per school year \$25

Registration fee and a week of advance tuition is due at the time of registration.

Advanced tuition will pay for final week of school.

Accounts that become past due will result in suspension or dismissal from the program.

Request for refunds of unused childcare payments must be made no later than three days after the students last school day. Any unclaimed funds will be used for support and maintenance of the child care program.

Rates are per child, per day:

Morning Care	\$ 4.00 per child
After Care	1 st child -\$8.00 2 nd child-\$7.00 3 rd child-\$5.00
After care if on reduced lunch*	1 st child-\$7.00 2 nd child-\$6.00 3 rd child-\$4.00
After care if on free lunch*	1 st child-\$6.00 2 nd child-\$5.00 3 rd child-\$3.00

*Proof of free or reduced lunch must be provided to qualify for the reduced rates.

I have read and understand the Laurel Nokomis Child Care fees and procedures.

 Printed name of parent/guardian

 Date

 Signature of parent/guardian

Laurel Nokomis School
Child Care Enrollment

Student information: AM Only ___ PM Only ___ AM&PM ___ M ___ T ___ W ___ TH ___ F ___

Last name First name Date of Birth Grade/Teacher

Parent/Guardian information:

Last name First name Phone number (h) Phone number (c) Phone number (w)

Relationship to student E-mail address

Last name First name Phone number (h) Phone number (c) Phone number (w)

Relationship to student E-mail address

Allergies _____

Medical conditions: _____

Custody issues: _____

The following adults (not listed above) are authorized to pick up my child from after care:

Name Phone number

Name Phone number

Name Phone number

Emergency Authorization

State law requires that we have written authorization from a child's legal guardian to seek medical help in the event of a medical emergency. Signing the statement below will provide us with that authorization.

Our policy, in the event of a medical emergency is to contact you first. If we are unable to reach you or any of your designated contacts and we deem the situation to be a medical emergency that requires immediate response, we will act accordingly on your behalf and in the best interest of your child.

Parent/Guardian Date

Office use only:

Fee Schedule ___ Free lunch ___ Reduced lunch ___ Multi child ___ Full fare Registration fee paid: _____