



Dear Parents, Welcome to Nativity Extended Care Program for the 2023-2024 School Year!

This service is being provided for the children at Nativity Catholic School (grades TK – 8) whose parents desire a safe and caring place for their children to go before and after school. This program offers time for supervised homework, supervised play, and other activities as determined by the Director. The Extended Care staff is CPR certified, Virtus trained, minimum college-aged, experienced working with children, and experienced in the educational field or planning careers working with children.

Morning Care

Monday - Friday

7:00 am - 7:30 am

Monday - Thursday
Fridays

3:00 pm - 6:00 pm

12:30 pm - 6:00 pm

Hourly Afternoon Extended Care Fees are calculated at a rate of \$5.00 per hour; any portion of an hour is also billed as one hour.

Hourly Morning Extended Care is a fee of \$2.00 per hour.

****Note: School dismissal is 3:00 pm. There is no charge if your child is picked up by 3:15 p.m.****

A flat monthly rate is provided at a significant discount. Your contract covers attendance at all normal hours in the Extended Care Program. Absenteeism is not subtracted from these fees. We bill for all months from September to May. June is not billed to compensate for winter and Spring break. Your contract to participate in the monthly plan is for the entire school year.

Afternoon Care (3:00 pm- 6:00 pm for TK - 8)

Monthly Rate

1 child	\$ 250
2 children	\$ 420
3+ children	\$ 540

Late Pick-up Fees

6:00 – 6:15 pm	\$15 per child
After 6:15 pm	\$15 + \$1 per minute

Collection and Fees through Blackbaud (Smart Tuition)

Nativity Extended Care Program partners with **Blackbaud (Smart Tuition)** for processing and collection of Extended Care Fees. Monthly fees are posted on the **10th** of the current month and are due on the **1st or the 15th** of the following month. Hourly fees are calculated at the end of each month, posted on the **10th** of the following month and due the **1st or the 15th** of the next month. If your Smart Tuition balance, including Extended Care fees, are not paid in full by the **1st or the 15th** of the month, then a **\$25 late fee** is assessed. Late fees are assessed year round.

Please read the following contract carefully, complete in full, initial and sign where indicated, and return to school by Thursday, August 31, 2023. We look forward to welcoming you and your child/ren to our Extended Care Program.

Sincerely,

Ms. Christy Garcia
Extended Daycare Director

Mrs. Diane Kaiser
Principal

IMPORTANT PARENT REMINDERS: PARENT RESPONSIBILITIES

1. All Nativity Families: Sign Contract/Emergency Care Form and return it to the school office.
 - a. ***In the event of an emergency***, Extended Care Program must have your contact/medical information.
2. List at least three (3) people, in addition to yourself, whom you authorize to pick up your child/ren each day. If there are any changes, notify the Director in writing immediately. **Only those authorized will sign out the child/ren or the child/ren will not be released. Any person other than the parent/guardian will be required to show photo I.D.**
3. School dismissal is at 3:00 pm. Other than ECP services, there is no supervision on the school grounds before 7:35 a.m. and after 3:15 p.m.
 - a. Any student left unsupervised (i.e., not in the ECP) will be checked into ECP for their safety and must be signed out by a parent or designated emergency pick-up person to be released.
 - b. Please make arrangements for appropriate transportation and supervision before and after school hours.
 - c. For the Extended Care Program (ECP): fees are assessed starting at **3:00 p.m.** at the **hourly rate**. There is no charge if your child is picked up from ECP **before 3:15 p.m.**
4. Monthly fees are posted on the **10th** of the current month and are due on the **1st or the 15th** of the following month. Hourly fees are calculated at the end of each month, posted on the **10th** of the following month and due the **1st or the 15th** of the next month. If your **Blackbaud (Smart Tuition)** balance, including Extended Care fees, are not paid in full by the **1st or the 15th** of the month, then a **\$25 late fee** is assessed. Late fees are assessed year round.
5. Late pick-up fees. Have your child/ren picked up by 6:00 p.m. A **\$15** fee per child will be assessed if your child/ren are picked up **after 6:00 pm** ECP closing time. **Any child/ren picked up after 6:15 p.m. will be charged \$1.00 per minute in addition to the \$15 fee.** Please note these charges are in addition to the regular fees. Frequent late pick-ups will be grounds for terminating participation in the program.
6. Provide snacks and/or lunch for your child/ren as necessary. No sodas or candy are allowed.
7. Once a child is picked up at Extended Care, for any reason, they **will not be allowed** to return to Extended Care until the following day. Please make other arrangements when making play dates, "birthdays," etc.
8. Though we strive to provide fun activities for your child/ren, homework is a priority in our program and we provide a qualified staff to assist them. Those without homework will participate in our reading program and/or educational games before playtime. Please note we are simply a support system and a complement to parents. It is the responsibility of the parent/s to review their child/ren's work and check their assignment books.
9. Please know that electronic devices are not allowed.
10. Questions or concerns, please email the Extended Care Director, Ms. Christy Garcia, at daycare@nativityemail.com

PLEASE REVIEW, SIGN, AND RETURN FORMS ON THE FOLLOWING PAGES BY AUGUST 31, 2023.

**ALL NATIVITY CATHOLIC SCHOOL FAMILIES:
COMPLETE AND RETURN THIS FORM BY August 31, 2023 (BOTH SIDES)**

**IN THE EVENT OF AN EMERGENCY: EXTENDED CARE PROGRAM MUST HAVE YOUR CONTACT/MEDICAL INFORMATION*

**2023-2024 Nativity Extended Care Program
Contract / Medical Information**

I HAVE READ AND UNDERSTOOD ALL PARENT REMINDERS & RESPONSIBILITIES AS LISTED IN #1 - #10 IN THE WELCOME LETTER. _____

(Please INITIAL Here)

Family Name: _____

PLEASE SELECT YOUR CHOICE OF CARE: *(Select all that apply)*

HOURLY PLANS

____ HOURLY (TK-8, includes Morning Care and/or Afternoon Care)

MONTHLY PLANS

____ MORNING CARE (TK-8 Time: 7:00 am - 7:30 am)

____ AFTERNOON CARE (TK-8 Time: 3:00 pm - 6:00 pm)

Please list your child/ren and their grade level/s:

Child(ren):

Grade(s):

MANDATORY AFTER SCHOOL PICKUP INFORMATION
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The following are names and phone numbers of the **ONLY PERSONS** who are authorized to pick up my child(ren) after school (or to be called in an emergency). **Your child/ren will not be released to any person other than the parent/guardian unless listed here, and they must be prepared to show a photo ID.**

<u>NAME</u> (Please Print)	<u>RELATIONSHIP</u> (Please Print)	<u>HOME PHONE</u> (Use area code)	<u>WORK PHONE</u> (Use area code)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PLEASE COMPLETE MEDICAL RELEASE AND INFORMATION
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A Medical Release is written below and will be used in case of emergencies.

****It is extremely important this section be completed for any child(ren) participating in the ECP.****

I/We give permission for any emergency medical care for our child/ren who is/are enrolled in Nativity Extended Care Program.

_____ Child 1	_____ Child 2	_____ Child 3	_____ Child 4
_____ Mother (please print and sign)		_____ Father (please print and sign)	

Medical problems, allergies, or medication usage must be indicated for any child(ren) participating in the Extended Care Program. Please indicate any medical concerns below. Please state which child(ren) is/are identified with these named conditions, allergies, or medications. If not applicable, please simply mark n/a.

<u>Child(ren)</u>	<u>Medical Concern(s)</u>	<u>Epi-Pen or Other Needed in ECP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The undersigned parent(s) agree to indemnify and hold harmless the school and all their agents, employees, consultants (paid or volunteer) from any loss or liability arising out of their Extended Care Program, as such loss or liability relates to the children covered by this contract. The accident insurance held by the school for each student covers the students in the Extended Care Program as well. **We have read the contract and agree to the terms.**

Mother's Signature Date

Father's Signature Date

Mother's Name (printed)

Father's Name (printed)

Home Phone

Home Phone

Work Phone

Work Phone

Cell Phone

Cell Phone

Email Address

Email Address