

## EXTENDED SCHOOL DAY (ESD) PROGRAM / REGISTRATION FORM

The Academy ESD program is available to **ONLY 50** students under the following conditions:

- A. Registration is limited to the first 50 paid students. Additional children will be placed on a waiting list.
- B. A non-refundable registration fee of twenty-five dollars (\$25.00) per family is due upon registration.
- C. The fee is \$45 per week for childcare, regardless if child attends, includes both morning and afternoon. You are signing up your child for the school year. **There is NO Daily Rate**
- \*\*\*\*According to the Constitution of the State of Florida, Article VII, Section 10, it is a violation for public schools to operate on a “credit” basis.
- \*\*\*\*All payments must be made in advance prior to the start of the attendance period.
- \*\*\*\*You will not be given a bill, but will be expected to make payments each week.
- \*\*\*\*Checks shall be made payable to the Academy and submitted no later than Friday of week prior.
- D. Unexpected childcare is limited, and the \$10 fee must be **paid when child is picked up that day.**

### Times

Before school care 7:00 am – 7:40 am

After school care ends at 6:00 pm

### Fees

Breakfast starts at 7:00am

1 child \$45.00 per week

**PREPAYMENT is REQUIRED and is due before each week begins.**

2 children \$75.00 per week

More than 2 children – an additional \$20.00/wk for each child

### Late Payments

A late payment fee is charged when tuition is not paid on or before Friday or the last day of school each week. According to the Constitution of the State of Florida, Article VII, Section 10, it is a violation for public schools to operate on a “credit” basis. All payments must be made in advance prior to the start of the attendance period. Tuition is due in full and must be paid in advance of the service period. All tuition and fees must be paid in full or other late tuition fees per child will continue to be accessed. State auditors annually examine ESD accounts at our school. According to state regulations, it is a violation for after-school programs to provide services without payment in advance. When this occurs, the school is operating on a “credit” basis. This is unacceptable according to the State of Florida.

Therefore: If payment is not submitted on time, a written notification will be given to the parents that:

- The tuition is overdue
- A late fee of \$5.00 per child will be charged
- Service may be discontinued for student(s) if payment is not received in full.
- **Student(s) with an outstanding account will not be permitted to attend ESD.** Parents will need to make other arrangements. Student(s) will go to the bottom of the waiting list.
- Please note once a parent is notified their child cannot attend ESD due to non-payment; the parent is not able to leave the child after school hours. **Technically, once removed from the program, if the child is left at school, it is abandonment.** Thirty (30) minutes after the end of the school day, after attempts to reach the parent have been unsuccessful and the student is not picked up, **law enforcement will be called.**

## **RULES for ESD**

- Your child is expected to follow established rules and to act properly as they would during the school day.
- Be prompt to pick up your child in the evening. Late charges of \$1.00 *per minute* start at 6:01 p.m.
- Escort your child into the building for before school care **and sign the child in.**
- We must have a signature each evening for your child in the attendance book. (located with group).
- Your child will not be released to anyone not on your pick-up list.
- If a parent or guardian fails to prepay for the upcoming week student will not be allowed to attend ESD. Once the student is withdrawn from the program the spot will be given to the next person on the waiting list. A new registration fee will be needed to restart your child's attendance to the program.

Appropriate safe behavior is expected from your child. Disciplinary strategies such as warning, time-out of various lengths, or loss of privileges (such as watching videos, crafts or playground time) will be used. If these do not work, your child may be suspended from attending the ESD program for up to five days. If the child's behavior does not improve after that, we reserve the right to revoke your child's privilege of attending the ESD Program.

- **A registration form will not be accepted if there is no email address listed.**

**There is a phone in ESD:** You may call 386-668-8911. This is the school number, and it will ring in the office until the office is closed. Please be patient when calling after hours, sometimes ESD is outside playing.

**VCS202 ( Evacuation protocol follows same as regular school day.)**

**I have read all of the above information and understand prepayment is required each week.**

**I understand there are late fees.**

**I understand should my child become not eligible to attend the after care program I must make arrangements to have them picked up and that I may not leave them at school after hours and I understand law enforcement may be called should I fail to pick up my child.**

**I have read and agree to adhere to this ESD policy.**\_\_\_\_\_

**Date:**

**Witnessed by:**\_\_\_\_\_

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**Date:**

**Witnessed by:**\_\_\_\_\_

Name(s) of Child(ren): \_\_\_\_\_

Grade(s)/Teacher(s) \_\_\_\_\_

Registration Fee: \$25.00      Paid:  Cash  Check # \_\_\_\_\_  Credit Card

Please check appropriate boxes.

**Before school:**

Monday  Tuesday  Wednesday  Thursday  Friday

**After school:**

Monday  Tuesday  Wednesday  Thursday  Friday

I have read the policies regarding the Reading Edge Academy ESD program and agree to comply.

\_\_\_\_\_  
(Parent/Guardian signature)

\_\_\_\_\_  
(Date)

**EMERGENCY CONTACT INFORMATION**

(Please print)

Parent/Guardian Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ **Email:** \_\_\_\_\_

Names of persons authorized to pick up child:

1) \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

2) \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

3) \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

My e-mail address: \_\_\_\_\_

Does your child have a life threatening health condition? Circle one: Yes No

If yes, please explain below.

Does your child have food allergies? Circle one: Yes No

If yes, what foods? What reaction signs/symptoms to look for? What can/must be done to remedy the reaction?

Does your child have an inhaler or an epi-pen in the front office? Circle one: Yes No