

SAINT ANSELM CATHOLIC ACADEMY

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MSGR. JOHN W. MALONEY, PASTOR

KEVIN FLANAGAN, PRINCIPAL

JOHN QUAGLIONE, CHAIRMAN

July 2019

Dear Parents and Guardians,

The **EXTENDED DAY PROGRAM** for grades PreK-3 to 8th grade will begin on Monday, September 9th. Our emphasis will be on the completion of homework, physical activity, the use of technology, and an arts component when possible. *Pre-K 3 and UPK rates are slightly higher since the students are dismissed earlier than K-8 students. Pre-K 3 and UPK families with K-8 siblings will be charged the lower K-8 rate.*

FEES PER FAMILY PER DAY:

Pick-up by 4:00 PM	Pre-K 3/UPK	\$15.00
	K-8	\$10.00
Pick-up by 5:00 PM	Pre-K 3/UPK	\$23.00
	K-8	\$18.00
Pick-up by 6:00 PM	Pre-K 3/UPK	\$30.00
	K-8	\$25.00

Daily session fees had not been raised in several years and facility maintenance during these hours required fee increases.

PICK-UP TIMES. You may pick up your child(ren) at any time but we ask that you coordinate this with Mrs. Batista.

Please Note: Payment is made on the first day of each school week or the day of attendance for single days. If payment is not made on the day specified, it is presumed that your child will be leaving at the regular school day dismissal time and will be dismissed at that time.

The Program ends *NOT LATER THAN 6:00 PM* on "regular" school days and 4:00 PM on "early" dismissal (1/2) days *BEFORE HOLIDAYS*. If a child is picked up after the above times, an additional fee of \$25.00 per hour will be required. **If you are detained for any reason, please call the school at EXT 136.** If a child is not picked up at the assigned time or 6:00 PM, we will use your Emergency Contact Form to contact those persons indicated on the Form. After 6:00 PM, if we receive no response, we will contact the local NYPD Police Precinct.

If you are registering, please complete the *AFTER SCHOOL REGISTRATION FORM* on the back of this page and return it within the first 3 days of school. Thank you!

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EXTENDED-DAY REGISTRATION FORM (2019-2020)

Please Print and complete each blank.

Child # 1 Name	Grade
Child # 2 Name	Grade
Child # 3 Name	Grade
Days in Program	Expected Pick-up time
Address	Home Phone
Parent/Guardian Name	Business/Cell Phone
Parent Emergency Contact Person	Phone
Parent Emergency Contact Person	Phone
-Parent Emergency Contact Person	Phone
NO CHILD WILL BE RELEASED TO A	