

L'Anse Creuse Public Schools

SCHOOL-AGE CHILD CARE PROGRAM

Please register my child(ren) in the SACC program of supervised before and after school activities.

I understand there is an annual non-refundable \$25.00 per family registration fee. I further understand that the hours of this program are **6:30 a.m.(Carkenord, Chesterfield, Green, Lobbestael and Yacks)** and **7:00 a.m. (Atwood, Graham, Higgins, South River and Tenniswood)** until school begins and after school until 6:00 p.m., Monday through Friday on regularly scheduled school days and early dismissal days only. *Please see fee policy for SACC rates.

Child's Name _____ Age _____

Child's Name _____ Age _____

Child's Name _____ Age _____

Mother's Name _____ Home# _____ Work # _____

Father's Name _____ Home# _____ Work # _____

Child/ren's Home Address _____

SCHEDULE

Please mark with an **X** days and sessions needed.

	Monday	Tuesday	Wednesday	Thursday	Friday
A.M.					
P.M.					

SPACE MUST BE RESERVED IN ADVANCE FOR EARLY DISMISSAL DAYS.

Please notify the SACC site director if there are any changes in your child's schedule.

Please return all forms to your SACC site director.

L'Anse Creuse Early Childhood Programs

493-5220 x1310

L'Anse Creuse Public Schools Early Childhood Programs
(586) 493-5220 extension 1310

SCHOOL AGE CHILD CARE 2006-07 FEE POLICY

Charge for the morning session (Site opening time until start of school):

(6:30 – 7:50 a.m.) Chesterfield and Yacks: **\$4.50 daily, \$22.50 weekly**
(6:30 – 8:45 a.m.) Carkenord, Green, Lobbestael: **\$7.50 daily, \$37.50 weekly**
(7:00 a.m. – 8:45 a.m.) Atwood, Graham, Higgins, South River,
Tenniswood: **\$5.75 daily, \$28.75 weekly**

Charge for the afternoon session (Close of school until 6 p.m.)

(2:50 - 6 :00 p.m.) Chesterfield and Yacks: **\$10.50 daily, 52.50 weekly**
(3:40 – 6:00 p.m.) Atwood, Carkenord, Green, Graham, Higgins, Lobbestael,
South River and Tenniswood: **\$7.75 daily, \$38.75 weekly**

Charges for care are taken to the hour- if you use less than the full session. For example:

5 minutes – 60 minutes = 1 hour or \$3.25,
61 minutes – 120 minutes = 2 hours or \$6.50,
121 minutes – 180 minutes = 3 hours or 9.75

FEES:

- Annual Family registration fee - \$25.00
- Hourly rate - \$3.25, there is a minimum charge of 1 hour per session.
- \$20.00 late pick-up fee for each ¼ hour after 6 p.m.
- Non-Sufficient-Funds check fee of \$25.00. After 2 NSF checks we will only accept cash or money orders for payment.

Space **must** be reserved in advance for early release and half days. **If you reserve space** and do not give us notice that you will **not** be using the program by the start of the afternoon session the day before, your account will be charged a \$10.00 fee. **If you do not reserve space** on half days and use the program your account will be charged an additional \$10.00 fee.

We process FIA childcare payments for families who qualify. You are responsible for payment until we receive authorization papers from your caseworker.

You are expected to keep your account current. If your bill exceeds \$100.00 and you have not been making regular payments your child cannot continue to use the SACC program. We encourage you to estimate your charges and pay for SACC in advance.

SACC is a self- supporting program of the L'Anse Creuse Public Schools.

Admission Date _____ Discharge Date _____

Child's Name _____
Last First Middle

Address _____ City _____ Zip _____

Home Phone _____ DOB _____ Grade _____ Teacher _____

Mother/Guardian's Name _____

Address (if different from child)

Address _____ City _____ State _____ Zip _____

Work Place _____ Work phone _____ Cell phone _____

Father/Guardian's Name _____

Address (if different from child)

Address _____ City _____ State _____ Zip _____

Work place _____ Work phone _____ Cell phone _____

Person to be notified in an emergency when parent/guardian is not available Relationship

Daytime Number: Cell phone:

Names of persons other than parent/guardian to whom the child may be released

1. Name _____ Phone _____ Cell _____

2. Name _____ Phone _____ Cell _____

3. Name _____ Phone _____ Cell _____

4. Name _____ Phone _____ Cell _____

In case of accident or serious illness and if the school is unable to contact me, I hereby authorize the school to take my child to the local hospital I have designated. I understand that all financial costs are my responsibility. I affirm that all information given on this card is correct to the best of my knowledge and that I reside within the L'Anse Creuse Public Schools district.

Signature of Parent/Guardian

Date signed

Name of Child's Doctor or Health Clinic _____

Phone Number _____ Hospital preferred for emergency treatment _____

Allergies _____

Additional medical concerns _____

L'Anse Creuse Public Schools

SACC PROGRAM RULES

BE SAFE

Walk in the halls
Caregivers need to know where you are at all times
Keep hands and feet to self
Listen and follow caregiver directions

BE KIND

Use appropriate language
Take turns with games and materials
Respect caregivers and other students

BE RESPONSIBLE

Clean up your game, craft and snack
Agree on the rules before you play the game
Play in designated areas

L'Anse Creuse Public Schools SACC Program Discipline Policy

The long-range goal for each child is the development of self-discipline. Our staff will encourage self-control and cooperation. The basic SACC rules will be discussed with the children. Positive reinforcement will be given for appropriate behavior. Inappropriate behavior will be redirected. At no time will physical punishment be used or will a child be deprived of any privileges.

Minor transgressions will result in a time out with a chance to cool down and receive support in working out a situation.

Problems that cause physical or mental injury to self or others will result in:

1. A caution card which parents must sign
2. Upon receipt of the third caution card the child will be suspended from the SACC program.

In order to re-enter the program, the parents, SACC site director and the Director of Early Childhood Programs must meet and devise an action plan for the child's behavior.

We have read the SACC handbook and agree to abide by the regulations and policies of the L'Anse Creuse SACC program.

Parent/Guardian Signature

Child's Signature

Date

L'ANSE CREUSE PUBLIC SCHOOLS
EARLY CHILDHOOD PROGRAMS

SACC PROGRAM
HEALTH STATEMENT

This acknowledges that my child _____

Date of birth _____ who attends the School Age Child Care

(SACC) Program at _____ ELEMENTARY SCHOOL

is in good health and his/her immunizations are current. I understand

that I assume responsibility for my child's health while he/she is at SACC.

Please list any special health problems:

Please list any allergies:

Parent/Guardian Signature

Date

**L'Anse Creuse Public Schools
School-Age Child Care**

MOVIE PERMISSION SLIP

A movie may be shown occasionally at SACC. Please sign one of the following statements giving your child permission to watch a movie with the rating of your choice.

The Motion Picture Association defines "G" and "PG" as follows:

"G" Rating - *Suitable for children of all ages*

"PG" Rating - *Suggests parental guidance*

I understand that the Motion Picture Association defines "G" as general and is suitable for children of all ages. I give my child permission to watch only movies with a "G" rating.

Child's Name

Parent or Guardian Signature

Date

I understand the Motion Picture Association ratings for "G" and "PG" movies and I give my child permission to watch movies with a "G" and "PG" rating.

Child's Name

Parent or Guardian Signature

Date