



St. Francis Xavier School BEFORE/AFTER SCHOOL CARE

WELCOME to the St. Francis Xavier Before/After School Care program. St. Francis Xavier School offers a before school and after school care programs.

Before School Care	7:00 a.m. – 7:30
After School Care	Dismissal – 6:00 p.m. each day

Before school care begins at 7:00 a.m. and ends when teacher/school supervision begins at 7:30. Afterschool care begins at school dismissal and lasts until 6:00 p.m. Before and after school care is an extension of the school day for your child and all rules and regulations as stated in the School Handbook will be enforced during these hours. Please be sure to go over these rules with your children.

An afternoon snack will be provided for your child during the after school program. You may send extra food with your child if you desire. Some children require additional snacks later in the day. Breakfast food may be brought in the morning.

We will provide adequate time for homework (afternoon). However, we suggest you go over their work with them at home. Some children may require more time to complete certain assignments. Your child is responsible for making sure they have all the materials needed. No one is allowed into the school building to retrieve items.

Parents sign out children at pickup (afternoon only). If someone other than a parent is signing out your child for the day, we must have this in writing and on file before we can release your child.

If your child attends Children's Choir, tutoring sessions, scouts, etc., please, let us know ahead of time so that we can assist them to and from each location.

In the event of inclement weather the St. Francis Xavier After School Care Program will follow St. Francis Xavier School and Birmingham City School closings. Please leave with us any daytime telephone numbers in the event you do not hear the announcement over the radio or T.V.

Please let us know if you have any questions or concerns. We are here to assist you and your children.

Sincerely Yours In Christ,
St. Francis Xavier School
After School Care Staff



ST. FRANCIS XAVIER SCHOOL BEFORE AND AFTER SCHOOL CARE RATES 2010-2011

You must have paid the registration fee and completed an emergency form for us to keep on file for your child to be considered officially registered in the After School Care Program.

BEFORE SCHOOL RATES

Registration: \$10 (0 if registered for ASC)

Rates for registered children

\$1 a day (billed monthly)

Non registered drop-in rate:

\$3 a day (billed monthly)

AFTER SCHOOL RATES

Registration: \$40

Registered students -Weekly Rates

\$35.00 weekly	(1 child in program)
50.00 weekly	(2 children in program)
65.00 weekly	(3 children in program)

Drop-in Rates:

\$ 7.00 daily	(1 child)
10.00 daily	(2 children)
15.00 daily	(3 children)

*****Students must register after 3rd “drop in” attendance**

Registered families will be sent a statement weekly. Please look for a white envelope sent home with your children. * You may continue to pay weekly, bi-monthly or monthly but you will receive a statement of your account each week.

Those registering for before and after school care can do so for one fee of \$60

Please make all checks payable to: St. Francis Xavier After School Care. All payments should be made in the school office clearly marked AFTER SCHOOL CARE.

ADDITIONAL RATES

1. Non-Registered ASC drop-in 10.00 per student per day
2. Late Pick up - for parents arriving after 6:00 p.m. a late fee of \$5.00 per every 5 minutes you are late will be charged. No Exceptions!

* Anyone who abuses the use of the before or after school program in any way will be asked to withdraw.
3. Unregistered students are required to register after 3rd drop in attendance (ASC).

**ST. FRANCIS XAVIER SCHOOL – BEFORE AND AFTER
SCHOOL CARE**

STUDENT APPLICATION

Student: _____ **Date of Birth** _____

Parents: _____

Address: _____

Mom work: _____ **cell** _____

Dad work: _____ **cell** _____

Other Emergency Contact: _____ **Tel** _____

Student will attend: ___ **Daily** ___ **Drop-in**
___ **Monday** ___ **Tuesday** ___ **Wednesday** ___ **Thursday** ___ **Friday**

EMERGENCY MEDICAL INFORMATION

ALLERGIES/MEDICAL INFORMATION: _____

PEDIATRICIAN/DOCTOR _____

DOCTOR'S PHONE NUMBER: _____ **CHART** _____

DENTIST: _____ **TEL NO** _____

PLEASE LIST ANY MAJOR HEALTH PROBLEMS:

PLEASE LIST ANY PRESENT MEDICATIONS:

_____ **DOSAGE** _____

Please list anything else we should be aware of regarding the health/care of your child.

**PLEASE LIST PEOPLE DESIGNATED AS APPROVED PICKUP FOR YOUR
CHILD(REN)** _____

DATE _____ **PARENT SIGNATURE** _____