

Warren-Prescott Extended Day Program

Extended Day Program for Pre-Kindergarten, Kindergarten, 1st, and 2nd Grade Students 2019-2020 School Year

We are pleased to offer an **Extended Day Program** at our school for Pre-Kindergarten, Kindergarten, 1st Grade, and 2nd Grade students, which will run from 3:10-6:00 pm. Monday through Friday. (1:10 – 4:00 pm on BPS Early Release Days)

K1ED = Pre-Kindergarten Extended Day

KED=Kindergarten Extended Day

FED = First Grade Extended Day

SED = Second Grade Extended Day

The program is run by teachers at the Warren Prescott. It is curriculum-based and the students complete their homework for the next day with instruction from teachers, as needed. When you come to pick them up, they are done with their homework for the next day!

Many days have themes and their price is included in the program, including Yoga. There may also be additional parent pay optional activities, such as Soccer, Legos, and Fitness.

THIS PROGRAM IS ON A FIRST COME, FIRST SERVE BASIS.

The following options are available for the Extended Day Program:

Full Time 5 days (Monday thru Friday)

Part Time I 3 days (Monday, Wednesday, Friday)

Part Time II 2 days (Tuesday & Thursday)

The Fee is \$24.00/day* for the Extended Day Program – this Fee includes a contribution to the Warren-Prescott Foundation, 501(c)(3) nonprofit organization. 100% of the contribution is used to support Warren-Prescott School programs.

Half Price Fee is \$12.00/day* if you Qualify for BPS Reduction under free or reduced lunch guidelines, pending approval.

* Subject to change

You will receive a request for payment approximately 1 month prior to each session. Accepted Payments: Cash, Check, Money Order (made payable to "Warren-Prescott Foundation")

There are 3 sessions and the payment schedule is arranged in the following installments:

1st Session: September-December (2 payments can be made)

2nd Session: January-March (1 payment)

3rd Session: April-June (1 payment)

Payment plans can be set up by request.

There are ***no refunds*** of monies paid into the program, as funding is based on expected enrollment.

If you would like to sign up for the Extended Day Program, please fill in the following 2 Page Extended Day Registration Form and return to Lindy Williamson via email, lindywilliamson@comcast.net, or drop it off in the Extended Day Box, which is located outside the Main Office.

Once your Registration Form is received a Registration Confirmation / Payment Information Email will be sent to you.

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Child's Name: _____

Circle Program:

K1ED KED FED SED

COST: \$24.00/day*

Special Payment Requirements are requested based on BPS "free lunch"?

Yes No

Cost \$12.00/day* (Pending Approval by BPS)
Copy of letter from BPS indicating qualification to be provided
* Subject to change

Circle Yes or No:

Full Time Monday-Friday: Yes No

Part Time I Monday, Wednesday, Friday: Yes No

Part Time II Tuesday & Thursday: Yes No

CONTACT INFORMATION

Mother/Guardian:

Father/Guardian:

Address: _____

Address: _____

E-mail _____

E-mail _____

Home Phone ____ - ____ - ____

Home Phone ____ - ____ - ____

Cell Phone ____ - ____ - ____

Cell Phone ____ - ____ - ____

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Nanny/Babysitter _____ phone # ____ - ____ - _____

Emergency Contact _____ phone # ____ - ____ - _____

The best contact person and phone # to be used between 3:10-6:00 :
_____, *at* ____ - ____ - _____.

Siblings _____
 name grade

 name grade

 name grade

The following persons are authorized to pick up my child from their after-school program.

_____	_____	_____	_____
name	relationship to child	name	relationship to child
_____	_____	_____	_____
name	relationship to child	name	relationship to child
_____	_____	_____	_____
name	relationship to child	name	relationship to child

Medical Information

Allergies _____

Medications _____

Medical
Conditions _____

We do not have a nurse available after regular school hours.

- I understand that if a serious medical emergency occurs after regular school hours, our staff will use the contact information provided to contact you and 911 will be called to provide medical assistance.
- I have read the Policy Manual and agree with the content

_____ Parent/Guardian Signature

_____ Date