

# Assumption Parish School Extended Care Program 2016-2017

**Before School Care: 7:00 – 8:15 am**  
**After School Care 3:00 – 6:00 pm**

The Assumption Parish School Extended Care Program is an hourly rate charge system. We are committed to quality care for families attending our school who need additional childcare services.

**Hourly Rates:**

\$4.50 an hour for 1 child                      \$8.00 an hour for 2 children                      \$12.00 an hour for 3 children

**A minimum of 1 hour per session will be charged for the use of extended care.**

This means that families using just AM care will be charged a minimum of 1 hour. Families using just PM care will be charged a minimum of 1 hour. Families using both AM and PM care will be charged a minimum of 2 hours (1 hour for each session).

Families will be charged at ½ hour increments thereafter in the afternoon program.

*Late pick-up charge is \$5.00 for every 5 minutes after 6:00 p.m.*

*Children will be removed from the program for accounts 60 days overdue until your account is current.*

There is an annual registration fee of **\$25.00** per child or **\$35.00** per family.

I agree to pay Assumption Parish School the **hourly fee** as indicated by monthly billing by the end of each month. I understand that accounts are due by the 5<sup>th</sup> of the following month. My anticipated use will be the following days and hours:

\_\_\_\_\_

\_\_\_\_\_

Child's Last Name	First Name	Sex	Birth Date	Grade

My registration fee of \_\_\_\_\_ is enclosed. Student must be registered before they can be enrolled in the Extended Care Program.

Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ASSUMPTION PARISH SCHOOL  
PRESCHOOL AND EXTENDED CARE ENROLLMENT FORM - Academic Year 2016 -2017**

Date of Enrollment				Grade		Teacher	
Child's Legal Name			Nickname		Birth Date		Sex
Home Address		City		Zip Code		Home Phone	
Father's Name			Home Address				
Father's Employment				Business Phone			
Business Address			Working Hours			Days	
Mother's Name			Home Address				
Mother's Employment				Business Phone			
Business Address		Working Hours		Days			
Brothers/Sisters Names		Age		Brothers/Sisters Names		Age	
Marital Status of Parents							
Other adults in the home				Relationship:			
Persons other than parent to call in case of emergency:							
Name		Address			Telephone		Relationship
Child's Physician				Phone			
Child's Dentist				Phone			
Date last seen by Physician				Date last seen by Dentist			
Persons (in addition to parent) authorized to remove child from school.							
Name:		Address:			Phone		
Name:		Address:			Phone:		
How does your child get to school?							
Special Information: (Note unique factors such as long illness, loss of a parent by separation or death, any major events a child may have difficulty in grasping. If known by our teachers, can be handled with consideration and tact and often help the child in the group.)							
Terminated Date:				Reason:			

# ASSUMPTION PARISH SCHOOL

W. 3618 INDIAN TRAIL RD. • SPOKANE, WA 99208 • 509-328-1115 • FAX 509-328-7872

## Academic Year 2016-17

Dear Parents/Guardians:

Per state requirement, a parent/legal guardian must sign a child into extended care/preschool and then sign him/her out of extended care or preschool. Parents or legal guardians may also authorize someone else to sign a child in or out. For purposes of identification, we must have on file the legal signatures of anyone who will be signing your child in or out of preschool or extended care. On the space below, parents/legal guardians and those whom you authorize to drop off or pick up your child are requested to write their legal signatures.

- **Child's Name** \_\_\_\_\_
  - **Mother's legal signature** \_\_\_\_\_  
(First and last legal name)
  - **Father's legal signature** \_\_\_\_\_  
(First and last legal name)
  - **Legal signature of other person authorized to sign your child in and out of extended care/preschool is** \_\_\_\_\_  
(First and last legal name)
  - **Legal signature of other person authorized to sign your child in and out of extended care/preschool is** \_\_\_\_\_  
(First and last legal name)
  - **Legal signature of other person authorized to sign your child in and out of extended care/preschool is** \_\_\_\_\_  
(First and last legal name)
  - **Legal signature of other person authorized to sign your child in and out of extended care/preschool is** \_\_\_\_\_  
(First and last legal name)
- 

**For those that qualify for extended care:**

I (we) further authorize the extended care providers to release my child into school and then to sign him/her into extended care after school.

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

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

*Children will ONLY be released to persons whose signatures are on file.*

**ASSUMPTION PARISH SCHOOL**  
**3618 West Indian Trail Road**  
**Spokane, WA 99208**  
**(509) 328-1115**  
**2016-2017**

Dear Extended Care Parents/Guardians:

Per state requirements, the Extended Care providers must monitor children's snacks each afternoon. Below we have included the requirements copied directly from the WAC written by the Department of Social and Health Services.

Each child must come to Extended Care with an appropriate snack. For the students who do not have a snack as outlined below, we will provide one at the cost of fifty cents per item.

- (c) In centers not serving full meals, the child's snacks must include one or more dairy or protein source provided daily, and contain a minimum of two of the following four components at each snack:
  - (i) A dairy product (yogurt, cheese);
  - (ii) A protein food (nuts, cheese and crackers, peanut butter);
  - (iii) Bread or bread alternate (bread, crackers); or
  - (iv) Fruit or vegetable or juice containing a minimum of fifty percent real juice (whole fruit, fruit cups, juices, or veggies).
- (d) The child's food must contain:
  - (i) A minimum of one serving of Vitamin C fruit, vegetable, or juice, provided daily; and
  - (ii) Servings of food high in Vitamin A, provided three or more times weekly.
- (12) The licensee shall monitor other foods brought from the child's home for consumption by the child, all children, or a group of children in care, ensuring safe preparation, storage, and serving and nutritional adequacy.

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Cut and return the bottom portion \_\_\_\_\_

I understand the snack requirements outlined by the state and I have talked to my child/ren about saving a snack for afternoon Extended Care.

Child/ren's names: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

# ASSUMPTION PARISH SCHOOL

W. 3816 INDIAN TRAIL RD. • SPOKANE, WA 99208 • 509-328-1115 • FAX 509-328-7872

Dear Parents,

Our DSHS licensing requires that we obtain this information from all of our extended care and preschool parents. Please take time to review your Extended Care or Preschool handbook and complete this form. Please return this form with your registration packet. We appreciate your time and willingness to complete this form.

T.J. Romano  
Principal

## EXTENDED CARE/PRESCHOOL PROGRAM

*I have reviewed or received information on the following topics:*

- Program policies and procedures
- The child's progress and issues relating to the child's care and individual practices concerning special needs
- Parent participation in program activities

*I have reviewed the program's handbook and the following information:*

- Enrollment and admission requirements
- The fee and payment plans
- A typical activity schedule, including hours of operation
- Meals and snacks served, including guidelines on food brought from the child's home
- Permission for free access by the child's parent to all program areas used by the child
- Signing in and signing out requirements
- Child abuse reporting law requirements
- Behavior management and discipline
- Nondiscrimination statement
- Religious and cultural activities
- Transportation and field trip activities
- Practices concerning an ill child
- Medication management
- Medical emergencies
- Disaster preparedness plans

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

WAC 388-295-2080

WAC 388-295-5030