



May 13, 2014

## 2014-2015 EXTENDED CARE PROGRAM REGISTRATION FORM

Dear Parents,

We will be starting a new year of the St. Joseph Extended Care Program in 2014-15. Hopefully it will be as successful as in past years. To assist in the final planning for the upcoming year, your cooperation is requested. If you plan on using the program, please complete the form below and return it to the School Office, Attn: Extended Care Registration as soon as possible. Upon receipt of the registration form, you will be sent a medical information sheet, general permission sheet and waiver sheet that must be filled out. The cost for each student will be \$4.70 per hour. A handbook will also be sent to those registered in the program.

1. The Before School Extended Care program operates from 7:00 to 7:45 a.m.
2. The After School Extended Care program operates from 2:20 to 6:00 p.m. on school attendance days.
3. The schedule of activities is as follows:
  - 2:20 to 2:55 Upper grade gym activity (outside weather permitting)
  - 2:55 to 3:25 Lower grade gym activity (outside weather permitting)
  - Snacks are served to the groups in the School Hall.
  - 3:30 to 4:00 Homework/Study/Reading
  - 4:00 to 6:00 Homework/Arts & Crafts/Games/Possible outdoor activity
4. The program is open to St. Joseph students enrolled in Kindergarten to 8<sup>th</sup> grade.

Each month a calendar will be sent home and you will mark the days your child will attend. If your plans change on a particular day, you must send a Travel Note to school that day informing us of your change in plans; the office will notify Extended Care personnel. More information will be provided in the Extended Care Handbook at the beginning of the school year.

The Extended Care Program will begin on Thursday, August 21, 2014.

Thank you,

Miss Jane Krueger  
Extended Care Program Director



## **Registration for St. Joseph Extended Care**

Child/Children's Name(s) and Grade(s):

\_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Mother Name & Work Phone: \_\_\_\_\_

Father Name & Work Phone: \_\_\_\_\_

**Please attach your non-refundable registration fee of \$30.00 for each child. Please make checks payable to St. Joseph Extended Care.**