

**LITTLE FLOWER CATHOLIC SCHOOL
AFTER SCHOOL PROGRAM
2018 - 2019**

Location: 8th Grade Classroom (East end of school building)

Hours: 3:30-5:30 p.m. Extra charge of \$10.00 per child, for every 15 minutes, 5:31pm onwards. **NO EXCUSES! NO EXCEPTIONS!**

Fees: Full-time (5 days/week) \$45.00 per child
Part-time (Drop in for 1 Day) \$12.00 per child
Drop-in on minimum day \$20.00 per child, per day
Late Payment Fee \$10.00 per week

Please keep in mind that your child is receiving after school care for a minimal cost of only \$45.00 per week for five days. Because Little Flower School is trying to offer a convenient, low cost service to the parents, **no refunds can be given due to absences.**

Payments: Payment is due the first day of the week, or if paying monthly, the first day of the month. Payments must be made on-line in advance of the week the child is cared for. Payments can be made on a weekly or monthly basis. There is a \$10.00 late fee per week for unpaid balances.
Extra charge for late pick up must be paid when the child is picked up.
For all drop-ins, payment must be made on-line by 5:30s pm the day of the drop-in, in order to avoid late fee.

Minimum Days: There are certain days throughout the school year when school is dismissed at 12:30 p.m. On those days the charge will be \$20.00 per child for drop-ins.

Snacks: A snack and drink will be provided each day at 3:45 p.m. for the children.
On minimum days children should bring a lunch and drink (no soft drinks).
Hot lunch, if ordered, will be delivered to the children in ASP.

Schedule: 3:30- 3:45 p.m. Outdoor play (weather permitting)
3:45 - 4:15 p.m. Snack/Socializing/Clean up
4:15 - 5:00p.m. Tutoring/homework***
5:00- 5:30p.m. Projects, games, or play

*** This time is scheduled for tutoring/homework, reading, or quiet work. Students who do not have homework are expected to sit quietly and read/draw as a courtesy to the students who have work.

Sign-out: Parents must sign out their child each day. A **written** permission note must be sent with your child to the office if someone other than the parent will be picking up the child. **If your child is leaving school early or will be picked up at 3:15 p.m. and will not attend the program, YOU MUST NOTIFY THE OFFICE.**

Parking: Parking is available at the east side of the Church or in the parking lot west of the school. Absolutely no driving on the playground is permitted. Please park in either of these two lots and enter through the 8th grade room. **We ask that you do not park in front of the school or enter through the front door.**

Behavior: All established policies of Little Flower School apply to the After School Program. Conduct referrals will be sent to the Principal and the parents, if problems occur.

If conduct problems continue, the child will not be allowed to return to the ASP.

In order to enroll in the After School Program please complete the ASP Registration and **return to the After School Program Coordinator, Mrs. Nancy Palatty.** To contact ASP please call 775-323-2931 and select the teacher option (Lightfoot).

The program is not available on minimum days before a scheduled holiday vacation -- Thanksgiving, Christmas, Spring Break and Easter.

Fridays are movie days. The ASP shows only "G" and "PG" rated movies.

***All inquiries related to ASP should be directed to Mrs. Palatty.
E-mail: npalatty@littleflowerschoolnv.org.***

**LFS AFTER SCHOOL PROGRAM
REGISTRATION FORM-2018-2019**

PLEASE PRINT STUDENT NAME

Student Name (1): _____ **Grade:** _____

Student Name (2): _____ **Grade:** _____

Student Name (3): _____ **Grade:** _____

My children will be attending the After School Program (please check):

___ Five days a week (\$45.00) ___ Occasionally (\$12.00) ___ Minimum days only (\$20.00)

The following people have permission to pick up my child(ren) from the ASP:

Name (1): _____ **Telephone #** _____

Name (2): _____ **Telephone #** _____

Name (3): _____ **Telephone #** _____

Mother: _____ **Business Telephone #** _____

Father: _____ **Business Telephone #** _____

EMERGENCY TELEPHONE (with name) # _____

I have read, understand, and will comply with the After School Program agreement.

Parent Signature

Date