



**Bay Haven Charter  
Academy, Inc.  
After Care  
School Year  
Registration Packet  
2020-2021**

# Bay Haven, Inc. After Care Program

## What is After Care?

After Care is an academic enrichment program which provides organized and supervised activities for elementary through high school students with highly qualified group leaders.

## What is offered in the program?

Program hours are 2:00 p.m. until 6:00 p.m. We provide a safe, fun and educational environment for students. Any Bay Haven, Inc. student can participate.

- ❖ Snack
- ❖ Homework time for grades 1<sup>st</sup>-8<sup>th</sup> (Kindergarten teachers request homework be done with parents)
- ❖ Specific planned activities
- ❖ Supervised free time
- ❖ Reading and enrichment time

## Payment Options:

We are excited to offer online payments as an added convenience for parents. The online payment link can be found on the school website. We will still accept payments by cash, check, or money order. We do not keep any cash on hand, therefore no change can be given. Please put your child's name on all payments before putting the payment in the drop box. Thank you for your help.

Supply fee: \$35 per child (Payable in cash, online, or check)	
Full Time (3 or more days)	\$50.00 per week per child.
Drop In Rate (1 or 2 days):	\$25.00 per day per child for the drop in rate/After two days you will be charged the weekly rate.

If your child(ren) is registered as a full time student, then you are responsible for full weekly rate whether he or she attends that week. Payment for the upcoming week must be paid on Monday for the upcoming week. We must receive payment by 6 p.m. Tuesday or there will be a \$10 late fee. **After two weeks of non-payment, your child will not be able to participate in the program.**

We do not give refunds if you choose not to come after you have prepaid for your child.

## Late Pick-Up Fee Policy

Any parent/guardian picking up children after 6p.m. will be charged a **late fee of \$2.00 per minute per child** which is due at that time. If a child is picked up late more than four (4) times, he or she will be dropped from the program.

## Bus Waiting List

Any student waiting on seat availability while attending After Care must present a balance paid in full statement to the Director of Transportation to be eligible.

### First Aid/Medication/Nit Free/Infectious Disease Policies

We will follow BDS/BHCA, Inc. School Policy.

### COVID-19 Guidelines/Waiver Attached

### Bay Haven, Inc. Aftercare Rules and Discipline Policy

Program Rules: Students are required to follow school rules, procedures, and expectations.

### **STUDENTS MUST REPORT DIRECTLY TO AFTER CARE AS SOON AS SCHOOL IS DISMISSED.**

1. Group leaders and Directors must be obeyed at all times, no disrespect will be tolerated.
2. Good sportsmanship and fair play must be shown at all times
3. **No electronic devices or phones will be permitted.**
4. Defacing or abusing school property will not be tolerated
5. Foul or abusive language will not be used at any time
6. Fighting of any kind will not be tolerated
7. Children are responsible for their own belongings. We are not responsible for damaged materials. Please put your child(ren)'s names on everything!
8. Children must remain with their assigned group leaders at all times. They are responsible to report and sign into After Care.
9. Children must wear shoes at all times. No flip flops.
10. If problems persist and affect the safety and educational enrichment of the other children in the program, as well as the safety of the staff, the After Care Asst. Director and Administration reserves the right to suspend and/or expel a child from the program. **Actions may include verbal warning, time out (removal from group or activity), note to parents, parent conference, suspension and/or termination from the program, as well as possible suspension from school. School discipline procedures will be followed.**

### Security Policy

To ensure the safety of your child, it is the parents responsibility to inform the aftercare office of the child(ren)'s absence or early dismissal no later than 11 a.m.

**Parents must be wearing a mask when entering the lobby area to sign out their child(ren). Parents will remain in the lobby area due to Covid 19 Restrictions.** The following procedures must be followed when picking your child(ren) up.

- ❖ **Parent/Guardian/Authorized persons must come into the designated pickup area to sign the student out. We will only release your child(ren) to the authorized people on your child's registration form. A valid photo I.D. is required every time your child is picked up.**
- ❖ If a situation occurs where the person picking up the child is not on the registration form, the child will remain on the campus until a parent/guardian/authorized person arrives.
- ❖ No child is to be taken from the Bay Haven, Inc. campuses without knowledge of the supervisor. You must come to the desk and sign your child(ren) out. You may not go to the playground and get your child; you must come to the desk first and they will call your child(ren). Violation of this policy will result in the dropping of your child from this program.

When you enroll your child(ren) in the program, you may add as many names to the authorized persons list to pick up your child(ren) as you wish. To make any changes to this list, you must do it in person at the site. **No phone calls or notes will be accepted.** We must have their names, in advance, if someone else will be picking up your child(ren). Remember, they must have a proper photo I.D. also. This policy is for the protection of your child(ren). Cooperation from all parents/guardians is absolutely necessary for us to maintain proper security.

**Important points to remember:**

- ❖ Remind your child to check in with their Group Leader when he or she arrives in After Care.
- ❖ Be prompt in picking up your child(ren) in the evening. **Every minute after 6 p.m. is \$2 per minute, per child. This fee is due at the time of pickup and if not paid it will be added to the following week's tuition.**
- ❖ Pay for the week in advance every Monday. If payment is not received by Tuesday at 6 p.m., then a \$10 late fee will be added to your child's account.
- ❖ Please remind your child, he or she is responsible for the items they bring to After Care. If they get broken, After Care is not responsible. Please put your child's name on all their belongings.
- ❖ Children **WILL NOT** be allowed to return to the classroom after dismissal from school.
- ❖ Each group will have a designated homework time. It is each child's responsibility to complete homework assignments. The After Care staff is glad to help with any homework. It is the responsibility of the parent to check the planner each day and ensure the homework is complete.
- ❖ Kindergarten homework is assigned and designated by their teachers to be done at home with the parent and **will not** be done in After Care.

**Please Note: After Care cannot be involved in custody issues without being provided court documentation. The person who registers the student for After Care services will be responsible for payments. We cannot make payment arrangements between parents.**

To provide better service to our parents the After Care Department will be providing care on the following dates

Monday, October 12, Teacher Planning Day  
Monday-Wednesday--January 4-6 Return from Christmas  
Friday, March 12 - Teacher Planning Day  
Tuesday, May 25 - Last full day of school

Campus' may be combined due to enrollment during the above dates

Above dates may be cancelled due to lack of interest

After Care staff members are always eager to help your kids in any way possible. Please feel free to let us know what we can do to help! If you have any questions, please contact either Traci Cornett at North Bay Haven (850) 630-6463 or 850-248-0214/ Chris Eaves at Bay Haven (850) 596-0820 or 850-248-0315.

Supply Fee Paid: \_\_\_\_\_ Date: \_\_\_\_\_ Cash/Check Number: \_\_\_\_\_



## BAY HAVEN, INC. ENROLLMENT FORM

### \$35 Supply Fee per Child

STUDENT'S NAME \_\_\_\_\_ GRADE \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME PHONE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SEX \_\_\_\_\_ Email \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ FATHER'S NAME \_\_\_\_\_

MOTHER'S EMPLOYER \_\_\_\_\_ FATHER'S EMPLOYER \_\_\_\_\_

MOTHER'S WORK PHONE \_\_\_\_\_ FATHER'S WORKPHONE \_\_\_\_\_

MOTHER'S CELL PHONE \_\_\_\_\_ FATHER'S CELL PHONE \_\_\_\_\_

HEALTH INSURANCE COMPANY \_\_\_\_\_ POLICY # \_\_\_\_\_

(ALL COSTS NOT COVERED BY INSURANCE ARE THE RESPONSIBILITY OF THE PARENT/GUARDIAN)

MEDICAL PROBLEMS/PHYSICAL LIMITATIONS/ALLERGIES \_\_\_\_\_

DAYS OF THE WEEK AFTER CARE IS NEEDED: **MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY**  
**(PLEASE CIRCLE ALL THAT APPLY)**

APPROXIMATE PICK UP TIMES: \_\_\_\_\_

This student may be picked up **ONLY** by the person(s) listed below. I understand if a situation occurs where a person does not have proper identification or IS NOT LISTED on the registration form for release of my child, the child is kept on the school grounds until the parent or guardians arrive. You may add to this list at any time; however **YOU MUST DO THIS IN PERSON. WRITTEN NOTES AND TELEPHONE CALLS WILL NOT BE ACCEPTED.** The following will be contacted in the event of an emergency, if the parents cannot be reached.

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

"I give permission for my child to participate in all activities, including field trips, programs and media coverage. I understand that all precautions will be taken for his/her safety and I will not hold Bay Haven/North Bay Haven Charter Academy and/or its staff responsible for any accidents. In case of emergency, I understand that every effort will be made to contact the parent/guardian named on this form. In the event one of them cannot be reached, I hereby give permission for the person in charge to select a physician, to hospitalize, secure proper treatment for, and to order injections, anesthesia or surgery for my child."

**LATE FEE: THE CENTER CLOSSES AT 6:00 PM. I UNDERSTAND THAT IF MY CHILD (REN) IS/ARE NOT PICKED UP BY CLOSING, I WILL BE CHARGED A FEE OF \$2.00 PER MINUTE PER CHILD FOR EVERY MINUTE AFTER 6:00 p.m.**

**I understand that ALL weekly fees are due in advance on Monday for that week's care. Payments received after 6:00 p.m. on Tuesday will be assessed a \$10 late charge per child. After two weeks of non-payment, After Care services will be terminated and collection proceedings will occur.**

**SIGNATURE OF PARENT/GUARDIAN** \_\_\_\_\_

I understand that I **MUST** pick up my child (ren) **by 6:00 p.m.** or a late fee of **\$2.00/PER MINUTE / PER CHILD will be charged.** Payment of the late fee is due immediately.

\_\_\_\_\_ Yes  
Parent's Initial

I have read and signed the Bay Haven/North Bay Haven Charter Academy Field Trip Policy. (In School Handbook)

\_\_\_\_\_ Yes  
Parent's Initial

I have received and signed a copy of the parent handbook. (In School Handbook) PLEASE READ CAREFULLY.

\_\_\_\_\_ Yes  
Parent's Initial

If problems persist and affect the safety and educational enrichment of the other children in the program, as well as the safety of the staff, the After Care Asst. Director and Administration reserves the right to suspend and/or expel a child from the program. **Actions may include verbal warning, time out (removal from group or activity), note to parents, parent conference, suspension and/or termination from the program, as well as possible suspension from school. School discipline procedures will be followed.**

I understand the above discipline procedures.

\_\_\_\_\_ Yes  
Parent's Initial

Student lives with \_\_\_\_\_ Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Other

Parents are: \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Other

Are there any custody issues? \_\_\_\_\_ Yes \_\_\_\_\_ No

"If so, please describe" \_\_\_\_\_

Name(s) of Child (ren) \_\_\_\_\_

**I understand that whoever signs this enrollment form is responsible for the weekly payments for After Care.**

\_\_\_\_\_ Yes  
Parent's Initial

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_