

Mother of Divine Providence School 2008-2009 C.A.R.E.S. Program

The C.A.R.E.S., Children Are Receiving Extended Services, program at Mother of Divine Providence School is open from 7:00 AM until 6:00 PM.

ELIGIBILITY All students enrolled in Mother of Divine Providence School are eligible to attend.

OPTIONS & FEES

Non-refundable \$25 registration fee per child or \$50 registration fee per family. No registration fee required when using program only for early dismissal days, late openings or lunch bunch day, however, fees are due the same day of use.

Please make checks payable to: "M.D.P. C.A.R.E.S."

| | | | |
|------------------------------------|---|-------|---------|
| Before School {AM} | 7:00 AM to 8:30 AM (OR Late openings 9 to 10:30 AM) | _____ | \$ 6.00 |
| Extended Day {EXAM or EXPM} | For Pre-Kindergarten 3 & 4 and ½ Day Kindergarten | | |
| | 11:30 AM to 3:30 PM (or 8:30 AM to 12:30 PM) | _____ | \$16.00 |
| Early Dismissals | 12:00 PM to 3:30 PM | _____ | \$16.00 |
| After School {PM} | 3:30 PM to 6:00 PM | _____ | \$11.00 |
| After School Athletes | 3:30 to 4:30 {Requires 2 weeks advance notice of attendance & prepayment} | | \$6.00 |

~~~~~Combination Session Rates Listed Below~~~~~

| | | | |
|--|-------------------------|-------|---------|
| Before School & Extended Day (AM OR PM) | {AM & EXAM or EXPM} | _____ | \$18.00 |
| Extended Day (AM OR PM) & After School | {EXAM or EXPM & PM} | _____ | \$20.00 |
| Before School and After School | {AM & PM} | _____ | \$15.00 |
| Before School, Extended Day OR Early Dismissal & After School | {AM, EXAM or EXPM & PM} | _____ | \$22.00 |

10% discount for two or more children attending daily (Monday through Friday). If your bill is not paid by the next billing period you will forfeit the discount.

NEW FOR 2008/09 Children registered for Pre-K-3, or Pre-K-4 with a five day & full day commitments should refer to the Early Childhood tuition rates. C.A.R.E.S. rates apply from 7:00AM – 8:30AM and 11:30 AM – 6:00PM and or 3:30 to 6:00 PM.

All Day Programs: The following rates apply to students not attending classes due to late openings Canceling Pre-K-3, Pre-K-4 & ½ Kindergarten OR on conference days.

| | | | |
|----------------------|-------------------------------------|-------|---------|
| 7:00 to 3:30 | AM & Extended AM & Extended PM | _____ | \$28.00 |
| 7:00 to 6:00 | AM & Extended AM & Extended PM & PM | _____ | \$30.00 |
| 9:00 to 3:30 | Late Opening AM & Extended PM | _____ | \$25.00 |
| 9:00 to 6:00 | Late Opening AM & Extended PM & PM | _____ | \$27.00 |
| 10:30 to 3:30 | Late Opening AM & Extended PM | _____ | \$18.00 |
| 10:30 to 6:00 | Late Opening AM, EXPM & PM | _____ | \$22.00 |

PROGRAM POLICIES

You will receive a weekly bill for services used the prior week Monday through Friday. A late fee of \$5.00 will be charged if your bill is not paid by the next billing period. If your bill is not paid by the second billing period, it will be turned over to the principal for collection and you may not use the program until the bill is paid in full. Checks are payable to "MDP-CARES".

DISCIPLINE POLICY

It is your responsibility to familiarize yourself with the school discipline policy located in the school handbook and the CARES program handbook. All infractions will be handled by the principal.

LATE PICK-UPS

C.A.R.E.S. closes at 6:00 PM. You will be charged \$1.00 per minute per child after 6:00 PM and due at the time you pick up. If you are late three times, we reserve the right to remove your child from our program.

INFORMATION & CONTACT NUMBERS For more information call the school office between 9:00 AM and 3:00 PM at 610-265-2323. (In case of an emergency after the office is closed you can reach C.A.R.E.S. staff at 610-265-9720, this number will not be answered during office hours.)

Mother of Divine Providence School C.A.R.E.S.

Registration Form 2008-2009

Please complete, enclose registration fee and return to the school office.

Please make checks payable to "M.D.P. School, C.A.R.E.S."

(Please circle the days needed)

Before School {AM} (7:00 to 8:30AM) _____ daily or Mon., Tues., Wed., Thu. Fri.
After School {PM} (3:20 to 6:00PM) _____ daily or Mon., Tues., Wed., Thu. Fri.

**After School Athletes (Gr. 5-8th) (3:20 to 4:30PM/Dismissed to coach in MDP gym) Request special form to complete.
{Requires 2 weeks advance notice of attendance on CARES form & prepayment made with notice.}**

Before & After School {AM & PM} _____ daily or Mon., Tues., Wed., Thu. Fri.
Extended AM (8:30AM to 12:30PM) _____ daily or Mon., Tues., Wed., Thu. Fri.
Extended PM (11:30AM to 3:30PM) _____ daily or Mon., Tues., Wed., Thu. Fri.
Before School & Extended Day (AM or PM). _____ daily or Mon., Tues., Wed., Thu. Fri.
Extended AM or PM & After School _____ daily or Mon., Tues., Wed., Thu. Fri.
Before, Extended Day AM or PM & After School _____ daily or Mon., Tues., Wed., Thu. Fri.

Family Name: _____ **Home Phone #** _____

Address: _____

Child(ren) Name(s) _____ **Grade** _____ **Age** _____ **Date of Birth** _____
_____ **Grade** _____ **Age** _____ **Date of Birth** _____
_____ **Grade** _____ **Age** _____ **Date of Birth** _____

Mother's Name _____ **Work Phone #** _____ **Cell #** _____

Father's Name _____ **Work Phone #** _____ **Cell #** _____

Name(s) of Person(s) authorized to pick up your child(ren): _____

In case you can not be reached at the above numbers please provide an Emergency contact:

Name _____ Phone # _____ Cell # _____

Please list any type of allergy (ies) we should be aware of.

Child's Name _____ Allergy(ies) _____

Parent's Signature: _____ Date _____