



Saint Margaret of Cortona School

452 West 260th Street Bronx, NY 10471 Tel: 718-549-8580 Fax: 718-884-3298

RE: After School Program 2010 - 2011

August, 2010

Dear Parents and Guardians:

Our **After School Program** serves working parents of pre-kindergarten through sixth grade students enrolled in St. Margaret of Cortona School. The program has an academic component, which provides homework time, arts and crafts, and other supervised recreational activities. Our After School Program is available from 2:30 p.m.-5:00 (6:00) p.m. each day and from 12:00 p.m. – 5:00 (6:00) p.m. on early dismissal days.

This year our After School Program will begin on Thursday, September 9th. If you are interested in having your child(ren) attend our After School Program, please complete the enclosed registration form and send it back to the school office with the \$25 registration fee per child (Attention: Mr. Hugh Keenan) by Monday, August 30, 2010.

Daily Program:

- Children proceed down to ASP promptly at dismissal.
- Students are not permitted to leave the building other than to go to the school playground for supervised play
- Attendance and Snack time (provided by parent)
- Homework and Activities/Playtime

Daily Fees:

- \$15.00 per day per child (2:40 p.m. – 5:00 p.m.)
- \$20.00 per day for extended hour until 6:00 p.m.
- \$25.00 for half days (12:00 p.m. dismissal)

Because the safety of your children is of utmost importance to us, it is essential that we know the number of students who will be attending our After School Program each day so that we can ensure that we have enough staff available for proper supervision. We ask that you help us continue to offer this service by clearly indicating on your registration form the days your child will be attending our ASP.

All fees are based on the number of days your child is scheduled to attend our After School Program. Because of this, if your child is absent from school, you are still responsible for the full number of days you indicated on your registration form. Late payments and late pickups will result in a \$10.00 surcharge. Feel free to contact me at the school (718) 549-8580 should you have any questions or concerns. Enjoy the rest of your summer. May you always know and experience God's many blessings!

Sincerely in Christ,

Mr. Hugh M. Keenan

St. Margaret of Cortona School
After School Program Registration Form
 2010-2011

Name of Student _____ Grade/Class: _____

Parent/Guardian _____

Address: _____

Home # () _____ Work # () _____ Cell # () _____

IN CASE OF AN EMERGENCY EVERY EFFORT WILL BE MADE TO CONTACT THE PARENT

Please provide the name and contact information for someone other than the parent/guardian who may be contacted in the case of an emergency.

Name _____

Address _____

Telephone # () _____

Relationship of this person to child: _____

Please list all individuals, including yourself, who have permission to pick up your child from the After School Program. Anyone not listed below will be unable to pick up your child unless a written notice is provided in advance.

Name of Person	Relationship to child	Phone

Please indicate below any medical problems that we should be aware of for your child(ren):

If your child suffers from asthma and uses an inhaler, there must be one available in the After School Program because the Nurse's Office is closed during the After School Program hours.

To ensure that we have enough supervision each day, it is important that we know the number of students who will be attending our After School Program. Please *check the days that your child will be attending*:

MONDAY **TUESDAY** **WEDNESDAY** **THURSDAY** **FRIDAY**

Please **check one** of the following:

I will pick up my child(ren) at 5:00pm **I am in need of an extended hour until 6:00pm**

All children must be picked up on time or a \$10 late fee will be added to your next monthly bill.

I have enclosed the \$25 non-refundable registration fee for each of my children in the amount of _____.

Parent/Guardian Signature

Date