

Oak View Elementary School



PRESENTS
THE NEW 2016-2017

Owl's Nest

AFTER SCHOOL EXTENDED DAY PROGRAM

REGISTRATION FEES:

Money Order or Cash only...

This is a one-time fee for the school year.

\$25.00	one child
\$40.00	two children
\$65.00	three children
\$90.00	four children

WEEKLY FEES:

Money Order or Cash only...

Late pick-ups = \$1 per minute

\$ 60.00	per week for one child
\$110.00	per week for two children
\$170.00	per week for three children
\$230.00	per week for four children

Register at:

Oak View Elementary School - June 6 – July 28, 2016
Tuesdays, Wednesdays, Thursdays
10 am- 1 pm

*Welcome to the 2016 – 2017
“Owl’s Nest!”
After School Extended Day Program (ASEDP):*



Dear Parents and Guardians:

*Welcome to our **NEW** After School Extended Day Program! This school year, Oak View Elementary School will transition from the after-school program operated by the YMCA to “Owl’s Nest”, an After-School Extended Day Program operated by Oak View Elementary School, under the umbrella of the DeKalb County School District.*

*We are extremely excited about this new endeavor and opportunity to serve our students with a more **academically and socially proficient** program. We have planned an exciting, fun, safe, and academically viable environment for your child to thrive in after school.*

Oak View Elementary School’s “Owl’s Nest” Program features:

- *After care hours are from 2:30 p.m.-6:30 p.m. on school days.*
- *Snacks provided daily.*
- *The ratio of staff to students is 1:15 and a maximum of 1:18.*
- *Certified teachers and certified para-professionals and other instructors will work with your child/children.*
- *Academic and cultural enrichment focus will be a part of our program.*
- *Structured homework and recreational time provided daily.*
- *Tutorial assistance and enrichment activities provided.*
- *Monthly newsletter with a calendar of events and activities listed.*
- *Computer access for use of skill enhancement programs provided.*

We wish to extend our sincere thanks for allowing us to serve you, your child and your after-school care needs.

Rodney Mallory
Principal

Andrea Smith-Ward
Co-Director

Lisa White
Co-Director



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Owl's Nest

2016-2017 Fee Information Sheet

Is there a registration fee?

- **Yes.** This is a one-time registration fee due at the time of registration. All fees are established by the district ASEDP Office.
- \$25.00 one child
- \$40.00 two children
- \$65.00 three children
- \$90.00 four children

When are my payments due?

- **Payments are made in advance on the Friday before the start of service OR no later than 6:30 p.m. on the first day of service (Monday).**
- Payments can be made with cash or money order only.
- **Late payments:** Payments made on Tuesday are "late" and will incur a late fee charge of \$5.
- **No payment:** Payments that are not received by the Tuesday of the week of service will have students withdrawn from the program. It is the parent's responsibility to find alternate after school care.

How much are the weekly fees?

- \$ 60.00 per week for one child
- \$110.00 per week for two children
- \$170.00 per week for three children
- \$230.00 per week for four children

If I have an emergency, can my child go to Owl's Nest for 1 day?

- Yes, the emergency drop in fee is \$15.00 (2:30pm – 6:30pm.)
- Parents can only drop in students for 2 days per week. **Three or more days** of attendance in the Owl's Nest constitutes a week and will require the FULL weekly fee.

*******NOTE: Parents are required to complete the registration form*******

Is there a penalty for picking up my child late?

- The ASEDP hours are **2:30 pm to 6:30 pm** on the days that school is in session.
- A late fee of \$1 per minute per child or family is charged for late pick-ups.
- **This charge begins at 6:31 pm and must be paid in cash upon arrival (only cash payment accepted).**
- Refusal to pay the late pick up fee will result in the student being withdrawn from the program.
- A pattern of late pick-ups will result in the student being suspended from, or withdrawn from the program.

Are you ready to register your child(ren) for OVES Owl's Nest?

- **Option 1:** **If you are viewing this on our website**, print and complete the following **"1 – 2 – 3 pages"** and bring them to the school with the appropriate registration fee.
- **Option 2:** Visit Oak View Elementary School and a registration packet will be provided for you.



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Parent Registration Letter
Oak View Elementary School
After School Extended Day Program (ASEDP)
“Owl’s Nest”

Dear Parents,

Welcome to our After School Extended Day Program; **Owl’s Nest!** We plan to provide a fun, safe, and an academically viable environment for your child during this school year. To ensure a successful year, we would like for you to read the following guidelines before signing:

1. Every child attending the After School Extended Day Program must have a current registration form on file at school. Parents are responsible for ensuring that the information on file is current. Registration fee is due upon registration.
2. The After School Program is a prepaid program. **Payments are due** on the Friday before the start of service, or by 6:30 pm Monday for the week’s session. If tuition is not received on Monday, **a late fee of \$5** will be added to the tuition payment and a payment must be made by Tuesday. **If payments are not received by Tuesday, your child will be withdrawn from the program.**
3. Payments will **ONLY** be accepted during after school hours. **DO NOT** send payments with children or drop off payment in the office.
4. The weekly tuition payments are **\$60 for one child, \$110 for two children, \$170 for three children, and \$230 for four children.** Three or more days of attendance constitutes a full week.
5. Money order or cash are the accepted methods of payment. Please make the money order payable to: **Oak View Elementary School ASEDP.** Any money over the exact amount will be credited to the next week’s tuition. You must request any After School Extended Day Program refunds in writing by the last day of the student’s school year. **No credits will be carried over to the next school year.**
6. **Tuition Fees will be collected weekly.** Individual payment accounts will not be established.
 7. A receipt will be issued at the time of payment. Please **file your receipts for proof of payment** and tax purposes.
The DeKalb County tax identification number letter will be issued in January.
 7. The ASEDP hours are **2:30 pm to 6:30 pm** on the days that school is in session. The late fee is \$1 per minute per child or family. **This charge begins at 6:31 pm and must be paid in cash upon arrival [only cash payment accepted].**
 8. Only individuals designated on the registration form with appropriate legal photo identification will be allowed to pick up your child. This is for your child’s protection. Your child must be signed out at the Checkout Desk daily.
 9. To ensure the safety and security of all students in the After School Extended Day Program, the **DeKalb County Police** may be contacted should an emergency occur which threatens the welfare of a child.
 10. **We expect all children to behave properly.** The same behavior expectations of the regular school day apply

in the After School Extended Day Program.

Students may be suspended or withdrawn from the After School Extended Day Program for the following

Reasons:

- a. Excessive Late Pick-ups
 - b. Discipline Problems
 - c. Nonpayment of Tuition and/or Late Pick-up Fees
11. If the school closes because of inclement weather or any other reason, the ASEDP will also be closed. We follow the procedures given in your child’s Inclement Weather pamphlet.

Parent’s Name (Print): _____

Parent’s Signature _____

Child/Children’s Name:

1.	3.
2.	4.

Registration Form

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Oak View Elementary School's "Owl's Nest"
After School Extended Day Program

IT IS THE PARENT/GUARDIAN'S RESPONSIBILITY TO INFORM THE AFTER SCHOOL EXTENDED PROGRAM OF ANY CHANGES TO THE INFORMATION ON THIS FORM DURING THE SCHOOL YEAR.

My child will be enrolled in the prepaid After School Extended Day Program for: (check one)
 Full Week Regular Drop in Individual Days (circle days) M T W Th F Emergency Only

Please Print: An individual form must be completed for each child participating in ASED

Child(ren)'s Name(s):	Male/Female	Birth Date	Grade	Teacher
1				
2				
3				
4				

Please list any special medical consideration or medication your child (ren) may have. Additional form available.

Child(ren)'s Address:			
Street		APT #	
City	GA	Zip code	
Home Phone Number			

Mother's Name

Work# _____ Cell#: _____

Father's Name

Work# _____ Cell#: _____

In case of emergency and the guardian(s) listed above cannot be reached, please call the persons listed below. All emergency numbers should be local, accessible, and include area code. Appropriate legal photo identification is necessary at time of pick up.

Name	Work#	Cell#:
Name	Work#	Cell#:
Name	Work#	Cell#:
Doctor's Name		
Office #		

Preferred Hospital: In case of emergency, please transport my child to

The following people are NOT authorized to pick up my child from the After School Extended Day Program. *Legal documentation must be provided and on file and submitted with this form.

Name
Name
Name

Parent's/Guardian's Signature _____ Date _____



PARENT/GUARDIAN AGREEMENT CONTRACT 2015- 2016

Initial next to each statement:

- _____ *I understand and agree to pay my (ASEDP ~ Owl's Nest) fees on the Friday prior to the week of service, or no later than Monday of the week of service by 6:30 p.m.*
- _____ *I understand that my payment must be made with a **money order or cash only**. Please make the money order payable to: **Oak View Elementary School ASEDP**.*
- _____ *If my child is picked up after 6:31 pm, I understand and agree to pay the \$1.00 per minute late fee. This fee is due in cash at the time I arrive. **I also must contact the school at 6:30 pm with an approximate arrival time.***
- _____ *If my child(ren)'s ASEDP~Owl's Nest payment is past due, my child(ren) may not be allowed to attend the ASEDP until I make the payment. **If this occurs, I must provide the school with a written change of dismissal form.***
- _____ *I understand that 3 or more days of attendance in one week constitutes **a full week** and I must pay the weekly fee.*

Please list the names of your child(ren) who will attend the ASEDP:

1.	3.
2.	4.

Parent:

Print Name: _____ **Signature:** _____

Date: _____

Thank You for choosing



“Owl’s Nest” After School Program!