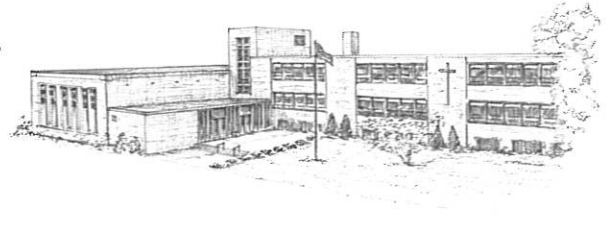


Our Lady of Mt. Carmel – St. Benedicta School



285 Clove Road
Staten Island, NY 10310

2017/2018

After school Program

Dear Parents,

We are pleased to inform you that our school will offer the afterschool program for all student's Pre-K to 8th grade. The program starts on Monday, September 11, 2017 and operate every day, Monday through Friday in two sessions. Session A will run from dismissal until 4:30, and Session B will run from dismissal until 6:30 pm.

The program includes homework supervision, a light snack and other recreational activities.

The cost of the program is as follows:

Afterschool Session	Time	Cost
Session A	Dismissal until 4:30 pm	\$100 per month paid in advance \$10 per day paid in advance
Session B	4:30 until 6:30 pm	\$100 per month paid in advance \$10 per day paid in advance

- * If a student is picked up after 4:30 you will be charged for attending Session B.
- * The latest pick up time is 6:30 pm. All students must be picked up by this time.
- * Please contact the school for additional sibling rates

Any last-minute requests not paid in advance, or if a student is picked up late after dismissal will be charged \$15 if picked up by 4:30 pm and \$30 if picked up by 6:30 pm. This will be charged directly to your Smart Tuition Account.

There are no refunds on unused days, but they can be transferred to another month, if purchased at the daily rate.

Please complete the application for each of the children that you wish to participate in this program and place the application and payment in an envelope to be returned to the office. Payment can be made in cash, check or money order. Payment for the first month is due on September 11, 2017. Payment is due on the first of each month.

Use the calendar attached to indicate which session/s or days you will be purchasing.

Afterschool Program

OLMC+SB SCHOOL 2017-2018

Child's Name: _____

Grade: _____

Birthday: _____

Child's Name: _____

Grade: _____

Birthday: _____

Child's Name: _____

Grade: _____

Birthday: _____

Child's Name: _____

Grade: _____

Birthday: _____

LIST ALL ADDITIONAL CHILDREN IN THE BACK

Household information

Address: _____

Home Phone #: _____

Parent/Guardian Information

Mother's Name: _____

Address _____

Cell Phone #: _____

Work # _____

Father's Name: _____

Address _____

Cell Phone #: _____

Work # _____

Other Emergency Contacts and authorized people that can pick up your child and their relationship, if an older sibling will pick up the younger siblings, list their name on this section:

	Name	relationship to child	Phone #
1.)	_____	_____	_____
2.)	_____	_____	_____
3.)	_____	_____	_____
4.)	_____	_____	_____
5.)	_____	_____	_____
6.)	_____	_____	_____

Please check this box if there is someone unauthorized to pick up your child and provide a court document to the school office. List the person's name here _____

Dismissal – Please select one option

My child will: be picked up will walk home by himself

Authorization

I authorize my child/children to participate in the afterschool program of Our Lady of Mt. Carmel-St. Benedicta school. I agree to make the payment for the program and to pick up my children on time. I agree to inform the school if any of the information above changes.

Parent/Guardian Signature _____

Date: _____

OLMC+SB AFTERSCHOOL CALENDAR SEPTEMBER 2017-2018

Parent Name _____ Phone Number _____

SELECT PAYMENT BY MONTH OR BY DAY AND THE SESSION - SEND PAYMENT WITH THIS CALENDAR BY THE 1ST OF THE MONTH

IF PAYING PER MONTH - Put a check next to each session that you will purchase - payment must be included with this form
 IF PAYING PER DAY - Pick which session you will purchase and write down how many days your will purchase

- Session A (\$100 until 4:30)
 Session B (\$200 until 6:30)
 Total amount enclosed \$ _____
 payment type: cash check money order

Student 1: _____ DOB ___/___/___ Grade _____
 Student 2: _____ DOB ___/___/___ Grade _____
 Student 3: _____ DOB ___/___/___ Grade _____

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
10 Time: _____ Name: _____ Signature: _____	11 Time: _____ Name: _____ Signature: _____	12 Time: _____ Name: _____ Signature: _____	13 Time: _____ Name: _____ Signature: _____	14 Time: _____ Name: _____ Signature: _____	15 Time: _____ Name: _____ Signature: _____	16 Time: _____ Name: _____ Signature: _____
17	18 NO AFTERSCHOOL	19 NO AFTERSCHOOL	20 Time: _____ Name: _____ Signature: _____	21 Time: _____ Name: _____ Signature: _____	22 Time: _____ Name: _____ Signature: _____	23
24	25 Time: _____ Name: _____ Signature: _____	26 Time: _____ Name: _____ Signature: _____	27 Time: _____ Name: _____ Signature: _____	28 NO AFTERSCHOOL	29 Time: _____ Name: _____ Signature: _____	30