

AFTER BELL REGISTRATION

St. Genevieve School offers its families an optional extended-day service from dismissal time until 5:30 PM each school day. The service dates follow the school calendar.

The daily program begins with a snack time. A supervised study period follows. The study period is conducted by a classroom teacher and provides help with and supervision of homework assignments four days a week. Children are given much needed unstructured, supervised play time.

Students are accepted on a regular schedule. See below for the different options available. Please make note: **Drop-ins will be limited to emergencies only. The \$5.00 drop-in fee must be sent with the child on the same day of service, or paid at the time of pick-up.** In the past we have had too many families using this program only as an "as needed" basis which makes it difficult to calculate the number of staff needed to operate the program.

Tuition for After Bell will be a fixed monthly rate. There is a 20% discount for each additional child in a family. A monthly tuition bill will be sent home on the first of each month. It is to be returned with payment no later than the 15th of the month. The After Bell students are covered by the diocesan school insurance plan, the cost of which was covered in the school fees.

After Bell ends promptly at 5:30 PM.

Please check the blank that fits your families use:

_____ Full time – all week every week (\$75.00 per month)
Four days per week is considered full time

_____ Three days per week (\$45.00 per month)

_____ Two days per week (\$30.00 per month)

Start Date: _____

Parent's Name _____

Home Phone # _____ Work Phone # _____ Cell Phone # _____

Emergency Contact Name: _____ Phone# _____

Name: _____ Phone# _____

Name of Child(ren) to be enrolled: _____ Grade Level: _____

Does your child(ren) have medication in the office? Please list below the name of the child and the medication:

The following people have permission to pick up my child(ren) in the event that the parents are unable to do so:
Name _____ Relationship _____

Parent(s) Signature: _____ **Date:** _____