



St. Mel's Catholic Academy Early Childhood Center

Early Morning/After-Care Policies

We are happy to provide early drop-off and after school supervision for our students. To utilize this program, please note and adhere to the following policies:

- An application must be on file for all children utilizing the program
- Please inform us of any updates to your emergency contact information
- Individually wrapped snack and juice will be provided daily in after-care. Children are welcome to bring a snack from home as well.
- All COVID related health policies continue to be in place (ex. mask usage, social distancing, no sharing of food, etc.)
- Cost for program
 - \$5 per day for early morning
 - \$20 per day after care
- **Early drop off begins at 7am, and after-care ends at 5:30 PM**
- There will be an **additional fee \$5 per 15 minute interval** if child is not picked up by 5:30.
- Payment (cash or check) is due at the beginning of each month along with sign up calendar so we know what days to expect your child(ren) and can have the appropriate number of staff members available.
- Please complete one registration form/calendar for each child.
- Your child will only be released to those named on the registration form
- Please call school office (718) 539-8211 to speak to after-care staff if you need to make a change to the pick up list for your child or if you are running late for pick up.
- All early morning and after-care will use 26th Ave. entrance. For after-care pick up, please ring bell to alert staff to your arrival and sign your child out at book at desk. Please wait at desk for staff to bring your child to you. This is in an effort to prevent visitors in the building due to health concerns regarding COVID.



St. Mel's Catholic Academy Early Childhood Center

Early Morning/After-Care Registration

Student Name _____

Grade _____

Teacher _____

Parent Name _____

Phone _____

Parent Email _____

The following people are authorized to pick up my child and can be contacted if I cannot be reached in case of an emergency:

Name _____

Phone _____

Name _____

Phone _____

Name _____

Phone _____

Name _____

Phone _____

Name _____

Phone _____

Does your child have any allergies and/or medical issues staff needs to be aware of:

I have read and agree to adhere to the policies governing the Early Morning/After-Care program set forth by St. Mel's Early Childhood Center.

Parent Signature _____

