

# ST JOSEPH'S AFTER-SCHOOL CARE PROGRAMME

## 2022-2023 REGISTRATION

Date: \_\_\_\_\_  
yyyy/mm/dd

Child's last name: \_\_\_\_\_

Child's first name: \_\_\_\_\_

Child's birthdate: \_\_\_\_\_ Gender: M  F   
yyyy/mm/dd

Parents or Guardians: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Physical address: \_\_\_\_\_

Email: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

### Centre Goals and Objectives:

St Joseph's After-School Care Programme (ASC) provides out-of-school care for children after school. We offer a safe, stimulating environment for each child to develop physically, socially, intellectually, and emotionally. We work with parents to try to ensure consistency between environments for their child(ren) and to keep open and effective communication between the centre and parents.

### Hours of Operation and Fees:

**The school requires a deposit of \$150 upon registration.**

#### Hours:

Monday, Tuesday, Wednesday & Friday: 3:00 to 6:00 / Thursday: 2:00 to 6:00.

#### \*Daily rates:

Monday, Tuesday, Wednesday & Friday: 3:07 to 4:30: \$16.00 / ... to 6:00: \$20.00.

Thursday: 2:00 to 3:30: \$16.00 / ... to 5:00: \$20.00 / ... to 6:00: \$24.00.

\* Fees subject to change.

My child \_\_\_\_\_ will be attending After-School Care on:

( circle the days your child will attend)

Monday, Tuesday, Wednesday, Friday from \_\_\_\_\_ (times).

Thursday from \_\_\_\_\_ (times).

**Persons authorized to pick up my child:**

**Name:** \_\_\_\_\_ **Relationship to child:** \_\_\_\_\_

**Home/Cell #:** \_\_\_\_\_ **Work #:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Relationship to child:** \_\_\_\_\_

**Home/Cell #:** \_\_\_\_\_ **Work #:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Relationship to child:** \_\_\_\_\_

**Home/Cell #:** \_\_\_\_\_ **Work #:** \_\_\_\_\_

**Immunization Record:**

Please indicate the most recent immunizations and date.

	<b>1<sup>st</sup> 2 months</b>	<b>2<sup>nd</sup> 4 months</b>	<b>3<sup>rd</sup> 6 months</b>	<b>MMR 12 month</b>	<b>4<sup>th</sup> 18 month</b>	<b>5<sup>th</sup> 4-6 years</b>	<b>6<sup>th</sup> Grade 6</b>
<b>Diphtheria</b>							
<b>Pertusis</b>							
<b>Tetanus</b>							
<b>Polio</b>							
<b>Measles</b>							
<b>Mumps</b>							
<b>Rubella</b>							
<b>HIB</b>							
<b>Hepatitis B</b>							

Does your child have special needs or is there any other information we need that would help us in caring for your child? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## CONSENT FORMS

### Neighborhood Walks, and Walks to the Local Park:

I give permission for my child \_\_\_\_\_ to participate in spontaneous neighborhood walks and walks to our nearby local parks with the After School Care Programme Staff.

There will be a separate consent form for field trips away from the centre.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Photo Permission:

It is required by Child Care licensing to have a photograph of each child enrolled in the ASC program. I hereby give consent for my child \_\_\_\_\_ to be photographed for licensing purposes. I understand that these photographs may be used for use with the children, for ASC displays or community displays. Your consent will be obtained prior to any Photos submitted to any Media.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## ASC EMERGENCY CONSENT FORM

It is our policy to notify a parent when a child is ill or needs immediate medical attention. In an Emergency, we may not be able to contact parents. Our procedure, in an Emergency is to call an Ambulance immediately. Please sign the consent below so that we can take appropriate action on behalf of your child. This will accompany your child in an emergency.

I hereby give consent for my child \_\_\_\_\_ when ill / injured to be taken to the Hospital when I cannot be contacted.

I hereby give consent for my child \_\_\_\_\_ to receive medical treatment.

\_\_\_\_\_  
signature of parent / guardian (date)

\_\_\_\_\_  
name of witness (print please) signature of witness

**EMERGENCY CONSENT CARD** Lives with: Mother Father Both Please circle one.

Child's Name: \_\_\_\_\_  
surname first name(s)

Birth date: \_\_\_\_\_ Gender: M  F   
year/month/day

Physical & Mailing address: \_\_\_\_\_

**Mother's name:** \_\_\_\_\_ **Cell/Home phone:** \_\_\_\_\_

Work place: \_\_\_\_\_ Work phone: \_\_\_\_\_

**Father's name:** \_\_\_\_\_ **Cell/Home phone:** \_\_\_\_\_

Work place: \_\_\_\_\_ Work phone: \_\_\_\_\_

**Emergency contact:** \_\_\_\_\_ Phone: \_\_\_\_\_

Alternate contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Child's doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Tetanus shot: \_\_\_\_\_ Allergies/Medications: \_\_\_\_\_

Child's dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

**Care Card:** \_\_\_\_\_ Date effective: \_\_\_\_\_

Any custody issue we need to be aware of? \_\_\_\_\_

**Billing & Schedule Changes:**

When you register your child/ren you will be asked to sign up for the days and times that your child will be attending ASC. For example, if your child is attending Mondays, Wednesdays and Fridays, from 3:00-4:30pm, you will be scheduled for those times and you will be billed for those days and times from September to June. If you need an extra day of care (a “drop in” day), you will have to give notice to the instructor to confirm there is room on that day for your child, and that day will be added to your regular monthly bill.

If your child is sick or not able to attend the ASC for other reasons, you will still be charged for that day. There is no exemption from payment for illness, holidays, etc. If you are changing times and/or days, two weeks’ notice must be given using the forms available in the School Office or with the Instructor.

**Two weeks’ written notice is required for terminating enrollment in the program. There is a re-registration fee of \$50.00 (per child) if you re-enroll within the school year.**

**Absent Child:**

We ask that parents still call the school office (250-847-9414) if your scheduled child(ren) will not be coming to ASC as this is a safety measure to ensure all children are accounted for and no child is “lost en route.”

ASC will be closed for:

- All Statutory Holidays
- School Christmas Break
- Spring Break (depending on SD54’s timetable)
- Summer Holidays - July and August

**Parent Responsibilities:**

- Pick-up of your child no later than 6:00pm.
- A \$10.00 fee for every 10 minutes for late pick-up will apply after 6:00pm.
- If there is an emergency and you will be later than 6:00pm you must notify ASC as soon as possible.
- When your child is ill he/she should be kept home.
- If for any reason your child will not be attending the program because of an illness, please notify the school immediately by telephone, so we know your child is accounted for.
- If there are any health problems the ASC staff should be aware of, please provide details in order for staff to provide quality care to your child.
- Medication authorization forms, must be completed for any ongoing and temporary administration of medication to your child.
- Please provide an Immunization Record of your child from a Physician or from the local Health Unit for the Centre’s records.
- Please keep all contact information, especially Emergency contact updated with the school office.
- An extra set of clothes and footwear should be sent to the ASC. Also, please send your child in appropriate clothing for the weather and seasons.

- If you are permanently removing your child from the ASC, please complete the ASC change form available in the school Office.

**Centre Responsibilities:**

- Ensure the facility will comply with all requirements of the Community Care Facility Act and Child Care Licensing Regulations.
- Maintain health and safety regulations.
- Ensure that the physical structure and play areas are safe for children.
- Notify parents of any health and/or social problems or concerns for their child.
- Participate, within reason, with health officials in their child’s health program, including vision, speech, hearing, and general health screening; upon parents’ request or permission.
- Advise parents of any medical emergencies, reactions to medication, sudden illness or accident.
- Not send children home with anyone other than pre-authorized persons as indicated on the registration forms.
- Provide nutritious snacks each afternoon based on the Canada Food Guide.
- Your child will have the opportunity to participate in adequate indoor and outdoor experiences.

**My signature indicates that I understand the After-School Program’s policies and obligations, and agree to abide by them. Failure to do so may mean the removal of my child from the Centre.**

\_\_\_\_\_  
Parent/Guardian (print name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
After-School Program Supervisor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date (yyyy/mm/dd)

# St Joseph's After School Care Programme (ASC)

## Parent Information Handbook

(please keep these three pages)

Dear Parents:

Welcome! The information contained in this hand-out is to answer questions about our After School Care Programme.

The purpose of our program is to provide a safe, positive and caring environment for children after school.

If you have questions or concerns about your child or the program, please don't hesitate to contact me, or Hayden Drygas, Principal of St. Joseph's School. Your comments and concerns are important and let us know that you value the After School Care Program.

Sincerely,

Jadyn Gorbahn, ASC Coordinator  
250-847-9414 (school phone number)  
[stj@cispg.ca](mailto:stj@cispg.ca) (school email address)

## **PROGRAMME OVERVIEW**

The beginning of our daily routine will include checking in, and a time for relaxing. During this time your child may choose to play outside (if there is supervision), to read, or to play quiet games. Then there will be a nutritious snack. Afterwards, a chance to participate in outdoor and/or inside games and activities will be offered.

Toward the end of the afternoon, opportunities to do quiet activity (including homework) will be offered.

## **PROGRAMMEs POLICIES**

### **Hours and Fees**

Fees will be set according to the schedule that you filled out with the days and times. Payment is due on the 1<sup>st</sup> of every month. You will receive a statement at the beginning of September listing the amounts owing for each month. You will receive notice of any late payments. If payments are not received by the given date, your child(ren) will no longer be able to attend the program.

Payment is required for all scheduled days regardless whether your child attends. There is no exemption from payment for illness, holidays, etc.

**Two weeks' written notice is required for terminating enrollment in the program. There is a re-registration fee of \$50.00 (per child) if you re-enroll within the school year.**

The After School Care Programme will operate from September to June, from 3:00 to 6:00pm, Monday, Tuesday, Wednesday and Friday. On Thursdays, it will operate from 2:00 to 6:00pm. **All children are to be picked up at or before 6:00 pm.** The After School Care Programme will not operate during school holidays, non-instructional or pro-d days, but will be open early on those school days with early dismissal.

### **Supervision**

Staff will be present and at all times be monitoring children inside and outside of the facility. Children will not be left unsupervised.

### **Arrival and Departure**

Children are to check-in with staff at arrival. A parent or another authorized adult **MUST** enter the Small Hall and sign-out the child(ren), noting the time of departure. We can only release children to an **ADULT** who has been previously authorized by you.

\* Please be advised that if a non-custodial parent arrives to pick up a child, the staff will contact the custodial parent/guardian to confirm this arrangement, if previous arrangements were not made. Your child's safety is our priority!

Children will not be released if abuse is suspected or the person picking the child up appears incapable of providing safe care.

The After School Care Programme follows St. Joseph's School policy in reporting cases of suspected child abuse. This policy follows legal requirements.



## **Code of Conduct**

We want all children to feel safe and welcome. The After School Care Programme will adhere to St. Joseph's School policies regarding student conduct. Conflict situations can be avoided by closely monitoring the children at play and re-directing them before trouble occurs. Negative behaviours do sometimes occur and these will be dealt with by using discussion about the behavior and why it isn't acceptable. Self-esteem and dignity must be kept intact. If discussion is ineffective, then opportunity to have time away from the group will be provided. Staff will inform parents, at pick-up time, regarding negative behaviour and action taken. Further actions beyond these outlined may be required and will be carried out in consultation with the principal.

## **Sickness or Absenteeism**

In keeping with St. Joseph's school policy, please keep your child home if they have a cold or other illness (such as diarrhea, pink eye, vomiting). Illness will be less likely to spread to others. We request that you call the school office if your child is going to be absent so we know that the child is safely elsewhere.

In the event of a child becoming ill or injured at the centre, parents will be notified immediately and asked to collect their child.

## **Medication**

Medication can only be administered to a child when written consent is given by the parent/guardian or physician. Non-prescription drugs cannot be administered by programme staff. All staff has first aid training as per licensing policy.

## **Snack**

Children are responsible for bringing their own snack. Often, children will be encouraged to help prepare the snack. Once in a while, we will be baking with the children and these efforts will be used for snack.

## **Clothing**

Except in very inclement weather, we plan for outside play time. Children should come prepared for the weather. Please label all shoes and clothing. This will keep our lost and found to a minimum. Slippers or shoes are required for indoor use or in the event of a fire drill or actual emergency situation.

## **Smoking**

Please note that there is **no smoking** permitted on school property. This policy is in compliance with St Joseph's School and licensing policy.