CHILD'S NAME:



Waverly Student Centers Before and After School Program 2022/2023

- Quality Before and After School experiences
 - Homework help
- > STEAM Activities (Science, Technology, Engineering, Art and Math)

Snack provided daily

> Location	Address	Phone Number	Hours of Operation
East Intermediate School	3131 W. Michigan	K-1 st Grade: TBD	6:30am-School Bell
Student Center (Outside	Ave.	2 nd -3 rd Grade: TBD	School Bell-6:00pm
Door #9: DURING	Lansing, MI 48917	Child Care Office: 517-	*Half-day and no school day
CONSTRUCTION)		321-6999	care is offered for an
Door #14: AFTER			additional fee.
CONSTRUCTION IS			FULL DAY HOURS:
COMPLETE			6:30am-6:00pm
K-1 st Grade: TBD			
2-3 rd Grade: TBD			
4-6 th Grade: TBD			
			ļ

Transportation to and from Colt, Winans and Elmwood Elementary will be provided. (Exact time of departure TBD.)

For more information, visit the Waverly Community Schools website or contact Lacey Balzer (Child Care Supervisor) at lbalzer@waverlyk12.net or Hanna Sayles (Assistant Child Care Supervisor) hsayles@waverlyk12.net.

CHILD'S NAME:	• •	



Enrollment Process

Waverly Student Centers

Waverly Student Centers are combined at one location, East Intermediate School. The program will accept students from Kindergarten through 6th grade. Students will be bussed to their schools after the morning session and will be bussed to the Student Center after individual schools are dismissed.

- To enroll complete every page in the Student Centers Enrollment Packet. Please complete ONE packet PER CHILD. Paperwork is due a MINIMUM of 24 business hours before care is needed. (i.e. Paperwork turned in on Monday by 5:30pm will have a WEDNESDAY start date.) *Enrollment space MAY be LIMITED during construction.
- Include money order payment or completed Tuition Express form (available online or at East) to pay the registration fee of \$40 (\$25 per additional child) for the school year to complete the enrollment process.
- Complete a calendar for EACH month with the dates that your child will be attending circled. Changes with a minimum of 48 hours-notice can be made with written approval from the Supervisor or Assistant Supervisor.
- Turn the PACKET & CALENDARS (with registration payment) in to the Student Center located at East Intermediate School.

For further questions contact Lacey Balzer (Child Care Supervisor)
lbalzer@waverlyk12.net or Hanna Sayles (Assistant Child Care Supervisor)
hsayles@waverlyk12.net.

*Please keep this page for your records. *

^{*}Student Center Staff are available before and after school to accept enrollment packets.

CHILD'S NAME:

BLANK

CHILD'S NAME:



Waverly Student Center

Student Behavior Expectations

- I will follow directions the first time they are given.
- ❖ I will keep my hands, feet and all objects to myself.
- ❖ When in the building, I will use the voice level that is expected by my teacher during an activity.
- I will use appropriate language.
- ❖ I will ask a teacher for permission to leave the classroom.
- ❖ I understand that the Student Center is not responsible for the loss, theft, damage, or vandalism to student property including electronic devices and that the use of electronic devices is at Student Center staff's discretion.
- I will not willfully vandalize Student Center property. (Vandalism is defined as the willful destruction and defacing of district/program property. The student and parent will be held financially responsible for damages including, but not limited to, the cost for district staff or others to repair, replace, and/or clean-up the damaged property.)
- ❖ I will not participate in bullying behavior.

Some examples of specific behaviors that constitute bullying include but are not limited to:

- Spreading rumors or posting degrading, harmful, or explicit pictures, messages, or information using social media or other forms of electronic communication (also known as "cyber-bullying").
- Taunting or making sexual slurs about a person's gender orientation or sexual status.
- Name-calling, joking, or making offensive remarks about a person's religion, gender, ethnicity, or socioeconomic status.
- Physical acts of aggression, such as punching, slapping, or tripping someone.

Behavior Policy for Physical Aggression:

- 1st Incident: Warning- Verbal/Written: Conversation with parent
- 2nd Incident: 1 Day Suspension
 3rd Incident: 2 Day Suspension
- 4th Incident: 1 Week Suspension
- 5th Incident: Meeting with parent to discuss behavior plan
- 6th Incident+: Determined by Behavior Plan

I understand that my student is expected to follow all of the behavior expectations listed above. I understand that if he or she does not, he or she may be removed from the program.

Parent/guardian signature:	Date:
----------------------------	-------

^{*}Persistent VERBAL/SOCIAL Bullying WILL fall under the Behavior Policy for Physical Aggression. *

CHILD'S NAME:

Waverly Student Center Rates and Payment Schedule

2022/2023 School Year Registration Fees

- One Child: \$40
- Each Additional Child: \$25 (maximum family registration fee of \$80)

2022/2023 School Year Before and/or After School Rates

- Grades K-4:
 - \$8.50/am session (sibling rate: \$8.00/am session) 6:30 am-8:30 am*
 - o \$10.00/pm session (sibling rate: \$9.50/pm session) 3:30* pm-6:00 pm
 - o \$18.00/day (sibling rate: \$17.00) attends both before and after school
- Grades 5-6:
 - \$8.00/am session (sibling rate: \$7.50/am session) 6:30 am-7:30 am*
 - o \$10.50/pm session (sibling rate: \$10.00/pm session) 2:30pm-6:00 pm
 - o \$18.00/day (sibling rate: \$17.00) attends both before and after school

*Exact time of school commencement and dismissal may vary by building

Special Rates School Half Days

- Grades K-4:
 - \$22.00/day Half Day (sibling rate: \$21.00) (\$30/day if child attends before school and half day; sibling rate: \$28.00)
- Grades 5-6:
 - \$22.00/day Half Day (sibling rate: \$21.00) (\$30/day if child attends before school and half day; sibling rate: \$28.00)

School Full Day Off Rates (I.e. Winter Break, Spring Break, PD days, Holidays)

- For all Grade Levels:
 - \$28/day Half Day (5 hours or less) (sibling rate: \$25.00)
 - \$40/day Full Day (sibling rate: \$35.00)
 - o FEE FOR NO SHOW/CANCELLATION (without 24-hour notice): \$15/day

"Online Learning" Discounted Full Day Off Rates (applies only when the district is in "online learning")

- For all Grade Levels:
 - \$30/day (sibling rate: \$28.00)

Emergency School Closings (including inclement weather, etc.) *Student Center will open 2 hours later than normal (8:30am) under discretion of the Superintendent. *

- For all Grade Levels:
 - \$28/day Half Day (5 hours or less) (sibling rate: \$25.00)
 - \$40/day Full Day (sibling rate: \$35.00)

CHILD'S NAME:			

Payment Schedule

- Complete a calendar for EACH month with the dates that your child will be attending Student Center circled. (Schedule is REQUIRED to facilitate student bussing to and from schools as well as to help us keep ratio compliance). Schedule will be required to guarantee a spot in the Student Center Program. Changes in attendance will need to be approved 48 hours in advance by Lacey Balzer or Hanna Sayles.
- Student Center requires a 3-day attendance minimum per week. (i.e. Less than 3 days will be charged as 3 days.)
- We will **NOT** be able to accommodate "drop in" (unscheduled) care.
- Adjustments to schedules must be emailed a minimum of 48 hours in advance and approved by supervisor to secure the child's spot on the bus (I.e. My child needs to attend on Wednesday not the Thursday that was scheduled.) CHANGES ARE AT SUPERVISOR DISCRETION.
- Attendance calendars are due upon enrollment.
- Payment for each week will be due by the Monday of the following week.
- A late fee of \$20.00 will be applied to accounts that are 2 weeks past due.
- Tuition may be paid via Tuition Express automatic withdrawal, Tuition Express online, attendance computer POS or by money order only at Student Center

Late Fees and Child Illness Guidelines

Late Tuition Payment:

I am aware that tuition payments are due by Monday following the week of attendance unless I have made arrangements in writing with Student Center Staff and that a late payment fee of \$20.00 will be applied to accounts that are 2 weeks past due. Failure to make timely payments will result in my child being dis-enrolled from the program. If my child is dis-enrolled, I will have to pay an additional registration fee to re-enroll my child in the Student Center program.

Late Pickup Fee:

I am aware that I must pay a late pick-up fee of \$1.00 for each of the first 5 minutes (\$5.00) and \$2.00 for each additional five-minute period or portion thereof, after the classroom session ends.

Child Illness Guidelines:

I understand that if my child becomes ill while in attendance at the Student Center, that staff will notify me in cases of minor accident or illness. In serious cases, 911 will be called and if the condition is judged serious enough, the child will be transported to one of the local hospitals by emergency vehicle for treatment and the parents will be called as soon as possible.

Child's Name	 	
Parent/Guardian Signature/Date		

CHILD'S NAME:			
Date of Application:	Da ⁻	e you wish your child to begin	:
CHILD'S			
NAME	SCHOOL AND	GRADE (2022/2023 School Year)	
		PREFERRED PRONOUNS:	
Parent/Guardian Informati	on		
Mother/Guardian			
First Name:	M.I Last Name		
Home Address:		Home Phone	:
Cell Phone:	Check for	Text Messaging: Service Carrier:	
Employer:	Work Pho	one:	
Mother/Guardian SS#:	Email:		
[] Custodial Parent (If married, mark	c both parents)		
Father/Guardian			
First Name:	M.I Last Name		
Home Address:		Home Phone	:
Cell Phone:	Check for	Text Messaging: Service Carrier:	
Employer:	Work Pho	one:	
Father/Guardian SS#:	Email:		
[] Custodial Parent (If married, mark			
PG-Movie Permission: I giv	e permission for my	child to view carefully selecte	d movies with a PG rating.
Please circle and initial		·	
Care hours. I understand t	hat the photo/video	o be photographed or videota os will be used for information e related to Waverly Communi	/promotional purposes,
Please circle and initial:			
Information/Promotions	Yes/No	Newsletters	Yes/No
Facebook/Instagram	Yes/No	Website/Blog	Yes/No

CHILD'S NAME:		
CITIED STATISTE.		

CHILD INFORMATION RECORD

State of Michigan - Department of Licensing and Regulatory Affairs - Child Care Licensing

Instructions: Unless otherwise indicated, all requested information must be provided. If the information is not known or does not apply, "unknown" or "none" is the required response. A blank field, a line through a field or "N/A" are not acceptable responses.

For Provider Use Only:		Date of Admis	ssion	Date of Dis	charge				
Name of Child (l	Last, First, Middle Ini	tial)						Child's	Date of Birth
Address (Numbe	er and Street, Buildin	g/Apartmen	t Number)	Ci	ity		State	Zip Co	ode
Parent/Legal Gu	ardian's Name		Home Phone	Pa	arent/Legal Gu	ardian's Name (C	Optional)	Home (Phone)
Home Address (if not child's address	;)	Cell Phone	Ho	ome Address (if not child's addr	ess)	Cell Pi	hone
City		State	Zip Code	Cit	City State Zip Code		ode		
Email Address (optional)			Er	mail Address		-	-	
Employer Name Work Phone Employer Name Work Phone ()			Phone)						
Name of Child's	Name of Child's Physician or Health Clinic Physician's or Health Clinic's Phone Number								
Hospital Preferre	ed for Emergency Tr	eatment (opt	tional)						
Allergies, Specia	al Needs and Specia	Instructions	(Attach additiona	al sheets, if	necessary.)				
BCAL-3731 (Rev. 7-18) Previous edition 6-17 may be used. See Reverse Side									
Emergency Cont	act & Release of Child	t: List all indiv	iduale including pa	ronts/logal a	uardians in order	or of professors to	ho contrated	in an om	orgonou If
possible, include a	at least one person othe other column can be lef	er than the par	rents/legal guardian	s to be conta	acted in an emer				_
1.	1. () ()								
2.									
3. () ()									
Release of Child Only: List all individuals, other than the parents/legal guardians, to whom the child may be released. (If more individuals, attach additional sheets.)									
1.		()	2.			()	
3. () 4. ()									
Parent/Legal Guardian Initials:									
	ermission toWave	erly Student (minor child wh		nsed by the D	Department of Lic	censing and Regula	tory Affairs to	secure e	mergency
I certify that I ac	curately completed th	is form and i	f anything change	es, I will noti	fy the provider	by updating this f	orm.		
Signature of Pare	ent or Guardian					Date Sig	ned		
Date Card Reviewed	Parent or Legal Guardian Initials	Date Can Reviewed		-	Date Card Reviewed	Parent or Legal Guardian Initials		Card	Parent or Legal Guardian Initials
	LAF	RA is an equal	opportunity employ	yer/program.			COMPLE	ETION: R	'3 PA 116 equired fiolation Citation.
BCAL-3731 (Rev. 7-1	18) Previous edition 6-17m	av be used.							

CHILD'S NAME:
MEDICAL HISTORY AND CUSTODIAL INFORMATION
CHILDS NAME/D.O.B.:
I hereby certify that my child is in good health, their immunizations are up-to-date and his/her immunizations or immunization waiver is on file with the school.
PARENT(S) NAME:PARENT(S) SIGNATURE: Date:
PARENT PERMISSION FOR TOPICAL, NON-PRESCRIPTION MEDICATION
I GIVE PERMISSION TO THE STAFF OF WAVERLY COMMUNITY SCHOOLS STUDENT CENTERS, TO APPLY TOPICAL, NON-PRESCRIPTION MEDICATION PROVIDED BY ME (PARENT/GUARDIAN) (SUNSCREEN, INSECT REPELLENT, CHAPSTICK, LOTION, COUGH DROPS, ETC.) ON MY CHILD.
PARENT(S) SIGNATURE: Date:
MEDICAL HISTORY
PLEASE LIST BELOW ANY MEDICAL, SOCIAL AND/OR EMOTIONAL CONCERNS OR ALLERGIES (FOOD/ENVIRONMENTAL/MEDICATION/ETC.) THAT OUR STAFF NEED TO BE AWARE OF REGARDING YOUR CHILD. Please include if your child has a documented IEP/504 Plan.
1
2
3
CUSTODIAL CONCERNS
(Including individuals that are not allowed to pick up, etc.)
PLEASE INFORM THE STAFF IN WRITING BELOW IF THERE ARE ANY CONCERNS WITH CUSTODIAL SITUATIONS IN REGARD TO YOUR CHILD.
1
2

I HAVE A COURT DOCUMENT REGARDING THE ISSUES OF CUSTODIAL CONCERNS YES / NO If "yes," please submit a copy to Student Center Staff.

CHILD'S NAME:



WAVERLY STUDENT CENTER

Getting Acquainted with Your Child

To help us provide the best care possible for your child, please complete and return this form with your registration packet.

-Confidential information will be reviewed only by Student Center staff. – Child's Full Name: ______ Birthdate: ______ Nickname/Name your child prefers to be called: Child's Preferred Pronouns: Parent(s)/Guardian(s) Name Mother/Guardian______Father/Guardian_____ Marital Status: Siblings Names & Ages _____ My child's favorite toys are: ______ Have there been any changes in your child's life recently? _____ My child's greatest fears are: ______ When angry, my child will: ______ My child has difficulty: Please share any family traditions/holiday celebrations/heritage information: My child will need assistance with (i.e. going to the bathroom/remembering to use the bathroom, understanding/following directions, etc.): Other helpful information:

CHILD'S NAME:	

Waverly Student Center Tuition:

- Complete a calendar for each month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools as well as help keep us in ratio compliance).
- Student Center requires a 3-day attendance minimum per week for regular rates. (i.e. Less than 3 days will be charged as 3 days.)
- We will **NOT** be able to accommodate "drop in" (unscheduled) care.
- Payment for each week will be due by the Monday of the following week.
- A late fee of \$20.00 will be applied to accounts that are 2 weeks past due.

Please	outline below whom is responsible for payment of tuition and fees.
Parent	Agreement (please initial each policy):
	I agree to clock my child in and out each day of attendance
	I agree to call or email the childcare site 48 hours in advance to inform staff of a change in my child's scheduled attendance
	I understand that the child care program is a nut-free environment and I will ensure that no nut products are sent with my child for lunch or special treats.
	I understand that I will be informed and must provide permission for all planned field trips.
	I agree to take full responsibility for any damage to person or property caused by my child
	while in care.
	I agree that I, or one of my emergency contacts, will pick up my child immediately if his/her behavior or health requires sending him/her home.
	I understand that after 6:00 p.m. I must pay a late fee of \$1.00 for each of the first 5
	minutes (\$5.00) and \$2.00 for each additional five-minute period or portion thereof, after the
	classroom session ends.
	I understand that the Waverly Student Center's Parent Handbook details these and other
	policies and procedures, and that I have received a Parent Handbook upon enrollment.
	(SUMMER ONLY) Students will be REQUIRED to attend field trips if they are in attendance.
	If your child forgets their shirt, arrives after the bus has left OR behavior prohibits field trip
	attendance, your child will be required to stay home. *Exception: Doctor's Note/Court
	Orders/Summer School Enrollment *
	I understand that my child will ride a Waverly School District bus to school after Student
	Center morning attendance and from school to Student Center for afternoon attendance. I
	understand that my child will ride a Waverly School District bus for all Summer field trips. *If your
	child is absent for school, they may not attend the after school program that day.*
	I understand that it is my responsibility to notify the Student Center staff of any special
	need (i.e. IEP, 504, medical needs, allergies, etc.) so that they can plan accordingly to provide the
	best care possible for my child. This would also include a child who is allowed to self-carry an
_	inhaler or epi-pen.
	I understand that the Student Center is not responsible for the loss, theft, damage, or vandalism to student property including electronic devices and that the use of electronic devices is at Student Center staff's discretion.

Parent/Guardian Signature & Date:

CHILD'S NAME:
Playground Consent
The Department of Human Services, Office of Child Day Care Licensing has developed criteria for playgrounds and playground equipment as follows:
R400.8170 Outdoor Play Area
Rule 170
(11) The playground equipment, use zones, and surfacing in the outdoor play area shall be inspected by a certified playground safety inspector and an approval granted for playground equipment and areas used before issuance of an original provisional license, upon request of the department, and before using any newly added playground equipment. The center shall provide documentation of the inspection to the department upon request and shall keep it on file at the center.
(19) School-Age Centers operating in school buildings approved by the Michigan Department of Education are exempt from sub rule (11) of this rule, provided the licensee informs parents, in writing at the time of enrollment, if the center plans to use a public school's outdoor play area and equipment that does not comply with this rule.
In order for a child enrolled in a licensed program within a school approved by the Michigan Department of Education to utilize the playground, guardians must give their consent. Please sign below to provide permission for your child to use outdoor school play areas with equipment that may not comply with sub rule 11 above.
Parent Name:
Parent Signature/Date:
Parent/Legal Guardian Waiver and Release of Liability ("Waiver")
I am the parent/legal guardian of, and I give my child permission to participate in the, and I give my child, and I give my child recreational program organized by Waverly Community Schools (the "District").
I understand that this opportunity is voluntary and I have voluntarily opted for my child to participate. I further understand that the Program will involve activities including but not limited to use of school playground equipment and science experiments, that some events may take place off District grounds, and that some activities carry the potential for death, serious injury, and property loss.
On behalf of myself, my child, my family, and my successors, heirs, and assigns, I assume the risk of any and all injury that may occur in any manner related to the Program's activities. I freely and voluntarily agree to indemnify, defend, release, and forever hold harmless the District and its board members, officers, employees, volunteers, and agents from any claims, damages, costs, and/or responsibility of any kind ("Liability") that may be asserted by any person or entity for Liability, including attorney fees, caused by or arising out of my child's participation in the Program. This Waiver shall survive termination and/or completion of the Program and my child's participation therein.

2022/2023 Paperwork

Date: _____ Telephone Number: _____

CHILD'S NAME:			

WRITTEN INFORMATION PACKET DOCUMENTATION

Michigan Department of Licensing and Regulatory Affairs
Bureau of Community and Health Systems

Child(ren)'s Name(s) (Last, First)	Center Name
	Waverly Student Center

A written information packet has been provided at the time of enrollment. The packet included all the following information:

- Criteria for admission and withdrawal.
- Schedule of operation, denoting hours, days, and holidays during which the center is open and services are provided.
- · Fee policy.
- · Discipline policy.
- Food service program.
- · Program philosophy.
- · Typical daily routine.
- Parent notification plan for accidents, injuries, incidents, illnesses.
- · Exclusion policy for child illnesses.
- Notice of the availability of the center's licensing notebook.
 - The licensing notebook contains all the licensing inspection and special investigation reports and related corrective action plans since May 28, 2010.
 - o The licensing notebook is available to parents during regular business hours.
 - o Licensing inspection and special investigation reports from at least the past two years are available on the child care licensing website at www.michigan.gov/michildcare.

• Other		-
I certify that I received all of the above items.		
Parent/Guardian Signature	Date	

Note: A single BCAL-4340 form may be used for all children in the same family.

LARA is an equal opportunity employer/program.

Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

BCAL-4340 (12-15) MS Word

CHILD'S NAME:	
---------------	--

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Child's Name	School	Teacher/Grade
--------------	--------	---------------

August 2022 (TENTATIVE)						
Monday	Tuesday	Wednesday	Thursday	Friday		
1	2	3	4	5		
8	9	10	11	12 LAST DAY OF SUMMER PROGRAM		
15 STUDENT CENTER CLOSED	16 STUDENT CENTER CLOSED	17 STUDENT CENTER CLOSED	18 STUDENT CENTER CLOSED	19 STUDENT CENTER CLOSED		
22 STUDENT CENTER CLOSED	23 STUDENT CENTER CLOSED	24 FIRST DAY OF SCHOOL: STUDENT CENTER CLOSED	25 Before School After School	26 Before School After School		
29 Before School After School	30 Before School After School	31 Before School After School				

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools).
- Student Center requires a 3-day attendance minimum per week for regular rates.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

CHILD'S NAME:			

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Child's Name	School	Teacher/Grade
--------------	--------	---------------

September 2022 (TENTATIVE)						
Monday	Tuesday	Wednesday	Thursday	Friday		
			1 Before School After School	2 STUDENT CENTER CLOSED: LABOR DAY		
5 STUDENT CENTER CLOSED: LABOR	6 Before School	7 Before School	8 Before School	9 Before School		
DAY	After School	After School	After School	After School		
12 Before School After School	13 Before School After School	14 Before School After School	15 Before School After School	16 HALF DAY (less than 5 hours) FULL DAY		
19 Before School After School	20 Before School After School	21 Before School After School	22 Before School After School	23 Before School After School		
26 Before School After School	27 Before School After School	28 Before School After School	29 Before School After School	30 Before School After School		

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools).
- Student Center requires a 3-day attendance minimum per week for regular rates.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

CHILD'S NAME:	
---------------	--

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Child's Name	School	Teacher/	Grade
--------------	--------	----------	-------

October 2022 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
3	4	5	6	7
Before School	Before School	Before School	Before School	Before School
After School	After School	After School	After School	AFTER SCHOOL: EARLY RELEASE/HALF DAY
10	11	12	13	14
Before School	Before School	Before School	Before School	Before School
After School	After School	After School	After School	After School
17	18	19	20	21
Before School	Before School	Before School	Before School	HALF DAY (less than 5 hours)
After School	After School	AFTER SCHOOL: EARLY RELEASE/HALF DAY	AFTER SCHOOL: EARLY RELEASE/HALF DAY	FULL DAY
24	25	26	27	28
HALF DAY	Before School	Before School	Before School	Before School
(less than 5 hours)				
FULL DAY	After School	After School	After School	After School
31 Before School				
After School				

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools).
- Student Center requires a 3-day attendance minimum per week for regular rates.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

CHILD'S NAME:	
---------------	--

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Child's Name	School	Teacher/	Grade
--------------	--------	----------	-------

November 2022 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
	1	2	3	4
	Before School	Before School	Before School	Before School
	After School	After School	After School	After School
7	8	9	10	11
Before School	HALF DAY	Before School	Before School	Before School
	(less than 5 hours)			
After School		After School	After School	After School
	FULL DAY			
14	15	16	17	18
Before School	Before School	Before School	Before School	Before School
After School	After School	After School	After School	After School
21	22	23	24	25
Before School	Before School	HALF DAY	CLOSED HAPPY	CLOSED HAPPY
After School	After School	FULL DAY	THANKSGIVING	THANKSGIVING
28	29	30		
Before School	Before School	Before School		
After School	After School	After School		

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

CHILD'S NAME:

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Child's Name	School	Teacher/Grade
--------------	--------	---------------

December 2022 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
			1 Before School	2 Before School
5	6	7	After School	After School
Before School	Before School	Before School	Before School	Before School
After School	After School	After School	After School	After School
12 Before School	13 Before School	14 Before School	15 Before School	16 Before School
After School	After School	After School	After School	After School
19 HALF DAY (less than 5 hours) FULL DAY	20 HALF DAY (less than 5 hours) FULL DAY	21 HALF DAY (less than 5 hours) FULL DAY	22 HALF DAY (less than 5 hours) FULL DAY	23 STUDENT CENTER CLOSED: CHRISTMAS
26	27	20	20	20
26 STUDENT CENTER CLOSED: CHRISTMAS	27 HALF DAY (less than 5 hours) FULL DAY	28 HALF DAY (less than 5 hours) FULL DAY	29 STUDENT CENTER CLOSED: NEW YEAR	30 STUDENT CENTER CLOSED: NEW YEAR

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

CHILD'S NAME:	
---------------	--

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Child's Name	School	Teacher/Grade
--------------	--------	---------------

January 2023 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
2	3	4	5	6
HALF DAY	Before School	Before School	Before School	Before School
(less than 5 hours)				
	After School	After School	After School	After School
FULL DAY				
9	10	11	12	13
Before School	Before School	Before School	Before School	Before School
After School	After School	After School	After School	After School
16	17	18	19	20
STUDENT CENTER	Before School	Before School	Before School	Before School
CLOSED: MARTIN				
LUTHER KING JR	After School	After School	After School	AFTER SCHOOL:
DAY				EARLY
				RELEASE/HALF
22	2.4	25	26	DAY 2
23	24	25	26	<u>-</u>
Before School	Before School	Before School	Before School	Before School
After School	After School	After School	After School	After School
30	31			
Before School	Before School			
After School	After School			

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

CHILD'S NAME:	

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Only one child per calendar. Calendars including information for more than one child will be returned.

Child's Name	School	Teacher/Grade

February 2023 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
		1	2	3
		Before School	Before School	HALF DAY (less than 5 hours)
		After School	After School	FULL DAY
6	7	8	9	10
Before School	Before School	Before School	Before School	Before School
After School	After School	After School	After School	After School
13	14	15	16	17
Before School	Before School	Before School	Before School	HALF DAY
46. 6.1. 1	46. 6.1	.6. 6.1	46 61 1	(less than 5 hours)
After School	After School	After School	After School	FILL DAY
				FULL DAY
20	21	22	23	24
STUDENT CENTER	HALF DAY	Before School	Before School	Before School
CLOSED:	(less than 5 hours)			
PRESIDENT'S DAY		After School	After School	After School
	FULL DAY			
27	28			
Before School	Before School			
After School	After School			

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

•

CHILD'S NAME:		
---------------	--	--

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Child's Name	School	Teacher/Grade

	March 2023 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday	
		1	2	3	
		Before School	Before School	Before School	
		After School	After School	After School	
6	7	8	9	10	
Before School	Before School	Before School	Before School	HALF DAY (less than 5 hours)	
After School	After School	AFTER SCHOOL: EARLY RELEASE/HALF	AFTER SCHOOL: EARLY	FULL DAY	
		DAY	RELEASE/HALF DAY		
13	14	15	16	17	
Before School	Before School	Before School	Before School	Before School	
After School	After School	After School	After School	After School	
20	21	22	23	24	
Before School	Before School	Before School	Before School	HALF DAY (less than 5 hours)	
After School	After School	After School	After School		
				FULL DAY	
27	28	29	30	31	
HALF DAY	HALF DAY	HALF DAY	HALF DAY	HALF DAY	
(less than 5 hours)	(less than 5 hours)	(less than 5 hours)	(less than 5 hours)	(less than 5 hours)	
FULL DAY	FULL DAY	FULL DAY	FULL DAY	FULL DAY	

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).
- Student Center requires a 3-day attendance minimum per week.

a a.			
CHILD'S NAME:			
CITIED STATUL.			

Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged
to account that are 2 weeks past due.

K-6th Grade East Student Center Childcare Attendance Calendar

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Child's NameScho	olTeacher/Grade
------------------	-----------------

Monday	Tuesday			April 2023 (TENTATIVE)			
	luesuay	Wednesday	Thursday	Friday			
3	4	5	6	7			
Before School	Before School	Before School	Before School	Before School			
After School	After School	After School	After School	After School			
10	11	12	13	14			
Before School	Before School	Before School	Before School	Before School			
After School	After School	AFTER SCHOOL: EARLY RELEASE/HALF DAY	After School	After School			
17	18	19	20	21			
Before School	Before School	Before School	Before School	Before School			
After School	After School	After School	After School	After School			
24	25	26	27	28			
Before School	Before School	Before School	Before School	HALF DAY			
After School	After School	After School	After School	(less than 5 hours) FULL DAY			

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

CHILD'S NAME:

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Child's Name	School_	Teacher/Grade
Child's Name	School_	Teacher/Grade

May 2023 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
1	2	3	4	5
Before School	Before School	Before School	Before School	Before School
After School	After School	After School	After School	After School
8	9	10	11	12
Before School	Before School	Before School	Before School	Before School
After School	After School	After School	After School	AFTER SCHOOL: EARLY RELEASE/HALF DAY
15	16	17	18	19
Before School	Before School	Before School	Before School	Before School
After School	After School	After School	After School	After School
22	23	24	25	26
Before School	Before School	Before School	Before School	STUDENT CENTER CLOSED-
After School	After School	After School	After School	MEMORIAL DAY
29	30	31		
STUDENT CENTER	Before School	Before School		
CLOSED- MEMORIAL DAY	After School	After School		

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged
 to account that are 2 weeks past due.

CHILD'S NAME:				

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Child's Name	School_	Teacher/Grade	
--------------	---------	---------------	--

June 2023 (TENTATIVE)							
Monday	Tuesday	Wednesday	Thursday	Friday			
			1 Before School	2 Before School			
			After School	After School			
5 Before School	6 Before School	7 Before School	8 Before School	9 CLOSED			
After School	After School	After School	After School	See Student Center Staff for Summer Program Info			
12 FIRST DAY OF 2023 SUMMER PROGRAM!	13	14	15	16			
19	20	21	22	23			
26	27	28	29	30			

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.