**VIEW ONLY DO NOT PRINT AND FILL OUT. PLEASE USE ONLINE REGISTRATION FORM!**



**Extended Care Program**

2024-2025

**Please note: $25.00 registration fee must accompany this form to register for the program.**

Please provide the following information for each student attending the Ruth Harman Extended care program.
**Please ensure all required signatures are provided!**

 **Grade** (2024-25)

**PRINT Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **\_\_\_\_\_\_\_\_\_\_**

**PRINT Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **\_\_\_\_\_\_\_\_\_\_**

**PRINT Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **\_\_\_\_\_\_\_\_\_\_**

**PRINT Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **\_\_\_\_\_\_\_\_\_\_**

**PRINT Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **\_\_\_\_\_\_\_\_\_\_**

**Parent/Guardian 1:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Parent/Guardian 2:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_ Home Phone: (\_\_\_\_\_) \_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_ Work Phone: (\_\_\_\_\_) \_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_

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

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_

**SELECT ONE -** Student(s) Live With:

Mother and Father: Same Home \_\_\_\_

Mother and Father: Separate Homes \_\_\_\_ Mother Only \_\_\_\_ Father Only \_\_\_\_

Other\_\_\_ (if “Other,” please provide relationship to student(s) and contact information indicated above)

 **Extended Care Questionnaire**
**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: **\_\_\_/\_\_\_/\_\_\_**Grade **\_\_\_\_**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: **\_\_\_/\_\_\_/\_\_\_**Grade **\_\_\_\_**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: **\_\_\_/\_\_\_/\_\_\_**Grade **\_\_\_\_**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: **\_\_\_/\_\_\_/\_\_\_**Grade **\_\_\_\_**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: **\_\_\_/\_\_\_/\_\_\_**Grade **\_\_\_\_**

**1.  Are your children allowed to have a snack at a $1.00 charge? Y N**

 **Additional snacks? Y N**

**2.  Are your children allowed to have a drink at a $1.00 charge? Y N**

 **Additional drinks? Y N**

**3.  Would you like your children to start their homework in aftercare? Y N**

**4.  Are your children allowed to go on their Chromebook during aftercare? Y N**

**5.  Are your children allowed to play outside, with supervision, during aftercare? Y N**

**6.  If your child is allowed to use their Chromebook, are they allowed to play video Y N
games or go on the Internet?**

**7.  Does your child have any food allergies or allergies that we should know about?  If so, please list completely: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_8.  Does your child have any health concerns that we should know about? (Asthma, heart conditions, etc.)  Does this condition limit them in any way?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**9.  If there is anything special that you would like us to know about your child/children, please detail here.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PRINT** Parent Name: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**RUTH HARMAN EXTENDED CARE BILLING CONTACT INFORMATION**

Please provide complete contact information for billing purposes and select your **preferred method** of billing. It is the responsibility of each parent to notify the biller directly of any changes in address/email address. It is also the responsibility of the parents to split bills, if necessary. The biller will not get involved in divorce decrees, or split households beyond delivering the itemized bills to each parent/guardian. **If you need two copies sent, please fill out BOTH methods and check the box below indicating so.** No more than TWO copies will be sent.

**Name of Student(s):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**METHOD #1: MAILED COPY**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, STATE \_\_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**METHOD #2: EMAILED COPY**

NAME:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **I require a signed bill with Tax-ID to submit for reimbursement.**

 **(Ex: Flexible Spending Account)**

* **I require TWO bills.**

**I have read and understand the Rate Sheet located on the following page. I agree to pay for any and all charges my child accrues by using the Ruth Harman Extended Care Program.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print** Parent/Guardian Name

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_**

Parent/Guardian Signature Date

**RUTH HARMAN ACADEMY**

**Extended Care Program**

**Rate Sheet**

Snack $1.00

Drink $1.00

|  |  |  |  |
| --- | --- | --- | --- |
| Before Care | 1 Child | 2 Children | 3+ Children |
| Anytime between 7:00- 8:00 a.m. | $5.00 | $8.50 | $12.75 |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| After Care | 1 Child | 2 Children | 3+ Children |
| 1st hour to 4:15pm | $7.50 | $12.50 | $16.00 |
| Hourly rate beyond 1st hour  | $6.50 | $10.50 | $12.50 |

**Before care will be one standard daily fee regardless of drop off time**

**After 5:30pm - $1 per minute will be charged per child**

**\*\*ALL FAMILIES WILL BE REQUIRED TO PAY A $25.00 REGISTRATION FEE PRIOR TO UTILIZING BEFORE OR AFTER CARE SERVICES\*\***

**Policy for Collection of Fees**

**Please keep in mind that in order to keep our childcare program in-house we must maintain a 100% collection efficiency each month with minimal administrative duties.**

1. The parents or guardians of each family who would use Ruth Harman Academy extended care services are required to sign a contract stating that they have read this ‘Policy for Collection of Fees for Extended Care Services’ and agree to comply with the guidelines herein.
2. **Upon registration, every family will be required to pay a non-refundable registration fee of $25.00. If a family DOES NOT register before use, an Emergent Care fee of $15.00 will be charged IN ADDITION to the registration fee upon use.**
3. Payment is due by the **25th** of each month. Cash, checks, and credit cards are acceptable methods of payment.  Credit card payments can be made online by accessing the School Store from the Ruth Harman website.
4. Delinquent accounts will be immediately suspended until paid in full upon 2 months of non-payment. In order to return to the program, all outstanding balances need to be paid as well as the monthly average amount for the upcoming month.
5. When a suspension is implemented, if the student is sent to aftercare, the student(s) may attend the aftercare program at a rate **double the standard rate per hour.** Extended care supervisors will try to call to alert the parent(s) again upon the student(s) signing into the program that day. The parents will then have 24 hours to make arrangements for alternate care or pay the balance in full for re-entry into the program.  **Should the child not be picked up by the parent the following day, child protective services will be called by the child care supervisors and the child turned over to CPS for safety reasons. The next step becomes the responsibility of the parent.**

I HAVE READ AND ACCEPT THE ABOVE POLICIES AND PROCEDURES OF THE RUTH HARMAN CHILDCARE PROGRAM. I UNDERSTAND THAT THIS CONTRACT IS SUBJECT TO CHANGE AND THAT I WILL BE PROVIDED WITH A 30-DAY WRITTEN NOTICE OF ANY SUCH REVISIONS/CHANGES.

**Print** (Parent/Guardian 1 Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature (Parent/Guardian 1**) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_

**Print** (Parent/Guardian 2 Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature** (**Parent/Guardian 2**) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

**STOP! YOU HAVE SIGNED ALL NECESSARY FORMS. THE REMAINING DOCUMENTS ARE TO BE REMOVED AND KEPT FOR YOUR RECORDS.**

**Extended Care Fees and Late Fees**

Please see the attached fee schedule. Billing has been updated to standard hourly rates. **$1.00 per child per minute will be charged for children picked up after 5:30 pm.** (Fees may be subject to change.)

Statements will be mailed/emailed home. Payment is due in full by the **25th** day of the month for the prior month.

Checks must be made payable to ***Ruth Harman Academy***. ***Please do not include payment for any other school activity with this check***.

There is a late fee of **$20.00** for each month that a payment is late. Please see the *Policy for Collection of Fees for Extended Care Services*.

Students may not attend the Ruth Harman Extended care program unless FULL payment and ALL late fees have been paid up to date. Please see the *Policy for Collection of Fees for Extended Care Services*.

Parents/guardians are responsible for all extended care payments and late fees. Parents/guardians will also be held responsible for all court, attorney, and collection agency fees involved in collection of late payments and late fees.

Any penalties and/or fees for returned checks will be the responsibility of the parents/guardians.

**Hours and Breakfast/Snacks**

**Extended Day Program** has extended school programming that serves The Ruth Harman Academy students in Kindergarten through Eighth Grade. It runs Monday through Friday in the school gym. The Ruth Harman Extended Day Program **is closed** on days that school is not in session.

Activities are designed in keeping with the Ruth Harman Academy philosophy and include opportunities for educational development, healthy lifestyle development, recreational & fitness activities, and social skills development. Hours of operation are:

7:00 a.m. – 7:55 a.m. (“Before Care”)

at the end of the school day – 5:30 p.m. (“After Care”)

**All students not picked up at dismissal from school or any after school activity are escorted to the Ruth Harman Extended Care Program and families will be charged accordingly.**

**Drop Off:** Between 7:00 a.m. – 7:55 a.m., students will be dropped off at Door 18 (formally, Door 3 on the Vernon side doors are being renumbered and an update will be sent out if door number differs) and will ring the bell to be escorted into the gym by an extended care employee.

**Pick Up:** Only authorized persons may sign out a student who has been signed in to the Ruth Harman Extended Day Program. It is the responsibility of the parent/guardian to notify the school in writing of any changes to the authorized pick up list.

**Parent/Guardian Responsibility**: **Ruth Harman Extended Care Program closes promptly at 5:30 p.m**. All students are to be picked up prior to the end of the program. **A late fee of $1.00 per child per** **minute will be charged after 5:30 p.m.** Ruth Harman Academy is only responsible for children enrolled in the Ruth Harman Extended Care Program during hours of operation.

**Breakfast for Before Care Students:** If students are not able to eat breakfast before arriving to Before Care, the parent must send the child into the program with a juice box or milk and a simple breakfast. The student will be responsible for throwing away his/her trash and cleaning up his/her area. The Ruth Harman Extended Care program does not provide breakfast or beverages. The KUSD free and reduced breakfast program will begin at 8:03 in the Ruth Harman Cafeteria.

**Snacks for After Care:** A snack and drink are provided by The Ruth Harman School. Families are charged $1.00 for a snack and $1.00 for a drink per student. If you prefer, you may send a snack for your child.

**Discipline Policy**

The Ruth Harman Extended Care Program follows the same discipline policy and procedures as Ruth Harman Academy. Student consequences for not following the school discipline policy and procedures are:

1st Warning

2nd Consequence to be determined

3rd Parent/Guardian Contact

4th Principal Contact

5th Conference with Parent/Guardian, Supervisor of the Ruth Harman Extended Day Program and Principal

Continued misbehavior may result in suspension and/or dismissal from the program.

**Sick Students**

Sick students may not attend the Ruth Harman Extended Day Program, as this may cause other students to become sick as well. If a student becomes ill while attending the Ruth Harman Extended Day Program, the parents/guardian will be notified and expected to pick up the child. A student that is “sick” may have the following symptoms: a fever, a rash, vomiting, unexplained symptoms, or any student who appears to be less than healthy. It is up to the supervisor of the Ruth Harman Extended Day Program to decide if a student is too sick to be at the extended care program.

THIS IS A SAMPLE

**PRE-SUSPENSION OF EXTENDED CARE NOTICE**

Your Ruth Harman Extended care payment is delinquent. You have now incurred a late fee of $20.00. Please see the attached billing statement. If payment in full, including this late fee, is not received by the due date, then all extended care is suspended until payment in full is made. In order to reinstate your family in the Ruth Harman Extended care program, you will also have to pay your average monthly balance upfront prior to reinstallation to the program.

This suspension will happen on the 1st of next month, so please pay in full immediately to clear your account to avoid any interruption in care. The fastest way to make your payment is online atthrough the school store located on the Ruth Harman website.

If this is a case of another parent not paying their portion, please remember that we do not get involved in any divorce decrees. Payment in full is still due in order to prevent suspension of services.

**\*\***If you have any questions regarding this bill, please contact Marcey Milkie by phone or by email.

Marcey Milkie

(262) 359-7197

Ruthharmanchildcare@gmail.com

THIS IS A SAMPLE

**SUSPENSION OF CHILDCARE NOTICE**

Your Childcare payment is now 2 months delinquent and all Ruth Harman Extended Care services has been suspended effective the 1st of this month for the remainder of the school year.

Your billing statement is once again attached. Payment in full must be received, including all late fees. Should afterschool pick up arrangements not be made, and the student be sent to aftercare, the student(s) may attend the aftercare program at a rate double the standard rate per hour. Childcare supervisors will try to call to alert the parent(s) again upon the student(s) signing into the program that day. The parents will then have 24 hours to make arrangements for alternate care or pay the balance in full for re-entry into the program. **Should the child not be picked up by the parent the following day, child protective services will be called by the child care supervisors and the child turned over the CPS for safety reasons.**

If this is a case of another parent not paying their portion, please remember that we do not get involved in any divorce decrees. Payment in full is still due for reinstatement. The fastest way to make your payment is online through the school store on the Ruth Harman website.

If you have any questions regarding this bill, please contact Marcey Milkie by phone or by email.

Marcey Milkie

(262) 359-7197

Ruthharmanchildcare@gmail.com