

KEYWAY AFTER-SCHOOL CARE FOR 1ST-8TH GRADE ST. BENEDICT CATHEDRAL SCHOOL

PURPOSE: The Keyway After-School Care has been developed to provide a facility at school for children in 1st - 8th Grades to have a safe, secure, and caring environment until their parents are available after work

SERVICE TIME: **From 3:00 p.m. to 5:45 p.m. - (No morning hours)**

- **Program will not operate if school is closed early due to schedule or emergency reasons.**
- **For children not picked up by 5:45 p.m., there is an additional \$25.00 late fee charged.**
Chronic late pick-ups may result in elimination from the program.

FACILITY: **Ravens Roost**

- Telephone available; 425-4596 ext. 105
- Questions regarding billing, call Julie Stephan 812-228-0774
- Playground (weather permitting)
- Gym (when available)

ENROLLMENT: **Only 1st-8th Grade Students, NO SIBLINGS**

- Students may attend on a weekly, daily or as needed basis. A fee will be assessed for the days the student attends.

FEES: **\$6.75 per day. Payment will be due upon emailed receipt of statement. Youngest child, full rate, additional children, \$5.50/day per child.**

- Program coordinator will establish attendance calendar each month.
- A positive balance must be kept in the family's account. Payments may be made by monthly EFT, check, or online via Sycamore Education.
- KEYWAY balances will be communicated via email.
- **If child is picked up early (before 3:30 pm) a \$1.25 fee will be assessed for snack in lieu of the normal daily fee.**

PAYMENT: **IF BALANCES FOR KEYWAY SERVICES EXCEED \$50, THE PRIVILEGE OF USING KEYWAY WILL BE REVOKED IMMEDIATELY UNTIL THE BALANCE IS PAID IN FULL.**

PROGRAM: **Children will have an after-school snack each day**

- Staff will permit children to use playground facilities as weather permits, under supervision.
- Gym will be used as available, under supervision.
- **No High School Students May Stay In Keyway With Siblings**



KEYWAY AFTER-SCHOOL CARE

I wish to enroll my child (ren) in the KEY WAY After-School Care at St. Benedict Cathedral School. I am aware of the regulations and will abide by set policy.

CHILD(REN) ENROLLING IN KEYWAY AFTER-SCHOOL CARE:

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|-------|--------|-------|------|-------|--------|-------|------|-------|
| _____ | GRADE: | _____ | AGE: | _____ | GRADE: | _____ | AGE: | _____ |
| _____ | GRADE: | _____ | AGE: | _____ | GRADE: | _____ | AGE: | _____ |

MOTHER/GUARDIAN NAME: _____ CONTACT PHONE #: _____

FATHER/GUARDIAN NAME: _____ CONTACT PHONE #: _____

EMERGENCY CONTACT: _____ CONTACT PHONE #: _____
OTHER THAN PARENT

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____