



**BOYS & GIRLS CLUB  
OF PAWTUCKET**

**2019-20 Pre-Teen Before & After-School Program  
Enrollment Form**

*Please Print Clearly*

*Select the appropriate program and payment option you wish to enroll your child in:*

**Childcare Program**

**Private Pay Weekly Fee:**

- \$45 Before-School Care
- \$90 After-School Care
- \$130 Before & After-School Care

**Childcare Program**

**Private Pay Weekly Fee for Kindergarten Age Youth:**

- \$50 Before-School Care
- \$95 After-School Care
- \$140 Before & After-School Care

**Childcare Program**

**DHS Weekly Fee:**

Co-pay: \$ \_\_\_\_\_

Certificate Number: \_\_\_\_\_

**Drop-In Program (3:00 – 6:30 pm)**

**Fee:** Included in Club Membership

Name of Child (first name, last name)

Date of Birth

School

Grade

Age

Primary Parent/Guardian Name

Home Address

Phone #

Email

Employer

Work Address

Work Phone #

Parent/Guardian Name

Home Address

Phone #

Email

Employer

Work Address

Work Phone #

**Meals**

We participate in the CACFP which allows us to provide free nightly meals to your child. If you do not wish to have your child partake of these meals, please speak with our Director of Pre-Teen Programs.

**Medical Information and History**

**First Aid:** I authorize the Program Staff to administer first aid treatment to my child.

**Accident/Injury:** I hereby authorize the Boys & Girls Club of Pawtucket to arrange for medical examination and/or treatment of my child, \_\_\_\_\_, should an emergency arise at the Club or on a field trip. I understand that the Boys & Girls Club of Pawtucket will make a conscientious effort to contact me at the emergency numbers I have provided before any medical action is taken.

**Hospital:** Should an emergency arise, I understand that a conscientious effort will be made by the Boys & Girls Club of Pawtucket to contact me at the emergency numbers I have provided before any medical action is taken. I would prefer to have my child taken to the following hospital if the need arises: \_\_\_\_\_. I understand that choice of hospital may be limited by service of the local rescue squad.

Doctor: I authorize the Program Staff to contact \_\_\_\_\_ M.D. at (Phone #) \_\_\_\_\_ with questions the Staff may have regarding the health of my child.

Social: Please complete the "Tell Us About Your Child" form and attach a letter (as necessary) stating any additional information on how your child functions in a group setting which would be pertinent to their participation at the Club.

Any Allergies or Dietary Restrictions:  Yes  No

If yes, please explain: \_\_\_\_\_

### Authorized Pick-Up List

Authorized To Pick-Up (**please include parent(s)/guardian(s)**): All authorized persons must be **18 years of age or older** and must have a photo ID. The Club will not release a pre-teen member without written authorization. Please inform all authorized persons to have photo ID ready and available at pick-up. *Please note: your emergency contacts listed on the membership form must also be listed below for authorized to pick-up. Additionally, please designate any contact below who may be called in case of an emergency.*

I hereby authorize:			Emergency Contact
_____	_____	_____	<input type="checkbox"/>
Name	Phone #	Relationship to Child	
_____	_____	_____	<input type="checkbox"/>
Name	Phone #	Relationship to Child	
_____	_____	_____	<input type="checkbox"/>
Name	Phone #	Relationship to Child	
_____	_____	_____	<input type="checkbox"/>
Name	Phone #	Relationship to Child	
_____	_____	_____	<input type="checkbox"/>
Name	Phone #	Relationship to Child	
_____	_____	_____	<input type="checkbox"/>
Name	Phone #	Relationship to Child	
_____	_____	_____	<input type="checkbox"/>
Name	Phone #	Relationship to Child	

to pick up my child \_\_\_\_\_ from the Club's Pre-Teen After-School Programs. If I wish to add or remove anyone from this list, I will provide advance written notice to the Boys & Girls Club of Pawtucket.

**Unauthorized persons:**

A copy of legal documentation such as custody papers or restraining orders concerning your child's welfare must be kept on file at all times.

### Payment

**Private Pay:** I will be paying the rate at the top of this form based on the Childcare services I have chosen. I understand I will be responsible for paying the weekly fee each week or I will jeopardize my child's enrollment in the Childcare Program.

**OR**

**DHS:** I will be using DHS benefits to cover all or some of my childcare expenses. I understand I will be responsible on a weekly basis for any co-pay which DHS assigns or I will jeopardize my child's enrollment in the Childcare program. *I understand I will be responsible for all fees accrued while my DHS benefits are in pending status.*

**OR**

**Drop-in:** My child is enrolled in the after-school only drop-in program and I understand there are no additional fees for participation beyond the annual membership fee.

**Tell us More About Your Child**

1. Has your child ever been discharged from a childcare program:  Yes  No  
*If yes, please explain:*

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2. What types of things work best for your child in terms of reward and motivation?

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3. Do changes in routines or transitions to new activities affect your child's behavior:  Yes  No  Sometimes  
*If yes, what types of accommodations can we make to help your child adapt to change and transition:*

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4. Does your child have any sensory issues?  Yes  No  
*If yes, what type of sensitivity does your child have:*  Visual  Auditory  Smells  Touch  Taste  
 Other: \_\_\_\_\_

*Describe in more detail:* \_\_\_\_\_

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5. What behavioral challenges are we most likely to see at the Club?

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Are there triggers for these behaviors?  Sensory sensitivity  Change in schedule or routine

Social attention  Escape a boring task  Other: \_\_\_\_\_

6. Is there anything else you think we should know about your child?

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**School-Age Childcare Program Only**

I, \_\_\_\_\_ wish to enroll my child \_\_\_\_\_ in the Boys & Girls Club of Pawtucket's School-Age Childcare Program (Monday-Friday) during these hours:

Before-Care (6:30 – 8:30 a.m.)

After-Care (3:00\* – 6:30 p.m.).

*\*We will pick up your child when their school day ends.*

If your child currently enrolled in another childcare program:  Yes  No

If yes, please provide the name and phone number of the childcare center: \_\_\_\_\_

**Transportation Permission**

I \_\_\_\_\_ give permission for my child \_\_\_\_\_ to be transported by the Boys & Girls Club of Pawtucket to and/or from \_\_\_\_\_ school, in order to attend the Club's School-Age Childcare Program.

If my child will not be attending the School-Age Childcare Program on any given day, I understand that it is my responsibility to notify both the Boys & Girls Club of Pawtucket and my child's school before 12:00 pm regarding this change. I understand that if I fail to inform either the Club or the school, my child will be transported to the Boys & Girls Club of Pawtucket.

One week's tuition and the yearly Membership Fee must be paid for enrollment to be complete. The first week's tuition and membership fee are non-refundable if your child is accepted by the program.

All participants must have a current membership at the Boys & Girls Club of Pawtucket in order to participate in the Pre-Teen Before & After-School Program. Memberships must be renewed prior to expiration or your child may be dis-enrolled from the program.

I have received the Pre-Teen Before & After-School Program handbooks and have read and understand all the policy information that has been provided to me and agree to comply with these policies.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

**For Office Use Only**

Membership Current & Verified:  Y  N

First Week Tuition Amount: \$ \_\_\_\_\_

No Back Balance Due: \_\_\_\_\_

**Verified By:** \_\_\_\_\_

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

1<sup>st</sup> Page Completed:

2<sup>nd</sup> Page Completed:

3<sup>rd</sup> Page Signed:

(for office use only)

**Boys & Girls Club of Pawtucket  
Membership Application**

- Teen
- Pre-Teen
- Drop-Off  CC
- Pre-School  Enrich
- PHA
- New  Renewing

Processed by: \_\_\_\_\_

**Annual Fee: \$40.00 Resident\* / \$60.00 Non-Resident**  
*\*Pawtucket or Central Falls – based on member address*

Date of Enrollment: \_\_\_\_\_

**Please Print Clearly**

**YOUTH INFORMATION**

Member's Name: \_\_\_\_\_ Gender:  M  F  Other DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
First Middle Last Month / Day / Year

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Ethnic/Racial Origin:  Caucasian  African American  Hispanic  Asian  Native American  Multi-Racial  Other

School Attending: \_\_\_\_\_ Grade (in Sept 2019): \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

**Please list all contact information for your child's emergency contacts. Any contact previously provided will not be removed unless you notify us. If you need additional room to add more contacts please attach a separate sheet. All communications will be sent to the Primary Contact listed on the Membership Form.**

Primary Contact Name: \_\_\_\_\_ Relationship to member: \_\_\_\_\_  
*Please check all preferred methods of contact for general communications.*  Cell: (\_\_\_\_) \_\_\_\_\_  Work phone: (\_\_\_\_) \_\_\_\_\_  E-mail: \_\_\_\_\_

Secondary Contact Name: \_\_\_\_\_ Relationship to member: \_\_\_\_\_  
*Please check preferred method for emergency contact.*  Cell: (\_\_\_\_) \_\_\_\_\_  Work phone: (\_\_\_\_) \_\_\_\_\_  E-mail: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  H  C  W: (\_\_\_\_) \_\_\_\_\_ Relationship: \_\_\_\_\_ (other than parent/guardian and over 18 years old)

Emergency Contact: \_\_\_\_\_  H  C  W: (\_\_\_\_) \_\_\_\_\_ Relationship: \_\_\_\_\_ (other than parent/guardian and over 18 years old)

Member lives with:  Both Parents  Mother  Father  Guardian  Stepmother  Stepfather  Grandparents

**MEDICAL INFORMATION**

Please list any medical restrictions, allergies, or dietary restrictions your child may have: \_\_\_\_\_

Any restriction of activity for physical, emotional or psychological reasons?  Yes  No Explain: \_\_\_\_\_

Any condition now requiring regular medication?  Yes  No Name of medication(s): \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Physician's Phone: (\_\_\_\_) \_\_\_\_\_

Does member have health insurance:  Yes  No Health Plan Name: \_\_\_\_\_ Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

Permission for Treatment by Physician/Hospital in an emergency:  Yes  No

**HOUSEHOLD INFORMATION**

**NOTE:** This information is collected for grant writing purposes ONLY

# in Household: \_\_\_\_\_ ♦ Head of Household:  Female  Male ♦ Single Parent Household:  Yes  No ♦  Military Family: \_\_\_\_\_  
(branch)

Number in Household under 18: \_\_\_\_\_ ♦ Member of Household 65+:  Yes  No ♦ Estimated Yearly Household Income: \_\_\_\_\_

**PARENT/GUARDIAN: PLEASE READ AND SIGN THE FOLLOWING:**

I hereby give permission to my child to become a member of the Boys & Girls Club of Pawtucket. I understand that the Club and its personnel are not responsible for personal injury or loss of property. I agree to observe whatever rules are decided upon as best for the welfare of all. The Boys & Girls Club of Pawtucket reserves the right to dismiss a youngster from the Club. Refunds will not be made due to dismissal. Permission is given to use photos or motion pictures for publicity purposes.

In accordance with Section 7-6-9 of the RI General Laws entitled "Exemption from Liability", I hereby waive any liability that the Boys & Girls Club of Pawtucket, its officers, directors, trustees, agents, servants and employees might have and agree that said Boys & Girls Club of Pawtucket, shall not be liable for any bodily injury to the participant incurred while such participant is practicing for, or participating in any contest or exhibition of an athletic or sports nature sponsored by the Boys & Girls Club of Pawtucket; and hereby assume the risk of any bodily injury to such participant incurred while such participant is practicing for or participating in any contest or exhibition of an athletic or sports nature sponsored by the Boys & Girls Club of Pawtucket.

The health history on this form is correct so far as I know, and the herein described has permission to engage in all prescribed activities, except as noted by me and the physician. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by and the adult leader in charge, to hospitalize, secure proper anesthesia, or to order injections or surgery for the above named member.

**Boys & Girls Club of Pawtucket Hours for Drop-In Pre-Teen Members:** Monday – Friday 3:00 p.m. to 6:30 p.m. (During the School Year)

**Boys & Girls Club of Pawtucket Hours for Teen Members:** Monday – Friday 2:30 p.m to 9:00 p.m. (During the School Year)

**Early & Late Fee Policy:** There will be a fee of \$1.00 per minute that your child is left in the Boys & Girls Club before or after the hours of operation. Children will not be allowed back in until the fee has been paid.

The Boys & Girls Club of Pawtucket would like every member to have a positive day. Members will be held accountable for their actions to ensure a safe and fun environment for all. As a drop-in facility, we are not responsible for Club members' whereabouts. Additionally, please do not send toys, CD players, MP3 players, jewelry, cell phones, handheld games or other valuables to the Club. I understand the Boys & Girls Club of Pawtucket is not responsible for lost or stolen items.

I give my permission to the Boys & Girls Club of Pawtucket to share information about my child listed on this application with the Boys & Girls Clubs of America (BGCA) for research purposes and/or to evaluate the program's effectiveness. Information disclosed to BGCA may include: the information provided on this membership application form; information provided by the minor child's school or school district; and any other information collected by the Boys & Girls Club of Pawtucket, including but not limited to data collected via surveys or questionnaires. All information provided to BGCA will be kept confidential.

As a member of the Boys & Girls Club of Pawtucket, your child will have access to the Internet. While precautions are taken, it is possible s/he may access inappropriate sites. The Boys & Girls Club of Pawtucket has rules and consequences for such behavior; however we will not be responsible for the consequences of such access. Your child's signature below indicates that they understand and agree to abide by the Club Member Technology Rules & Regulations.

Among the many services available during our after-school program, we provide a wide variety of homework help and academic support programs. In order for us to assess and monitor the academic needs of our members and provide appropriate tutoring and academic services, the Boys & Girls Club of Pawtucket would like to collect the report cards and NECAP scores for your child in addition to having them participate in a diagnostic online survey. This release is valid for one year and may be revoked at any time by contacting the Boys & Girls Club of Pawtucket in writing.

I hereby consent and authorize the Boys & Girls Club of Pawtucket to survey my child about their Club experience, behaviors, skills and attitudes using a variety of survey instruments.

I hereby consent and authorize the Boys & Girls Club of Pawtucket to use and reproduce photographs and video taken of my child for publicity, advertising and marketing purposes of every description. *In order to opt out of the photo release, please complete the opt out form available at the Front Desk.* I also consent to my child utilizing the transportation offered by the Boys & Girls Club of Pawtucket. Additionally, I consent to my child participating in all Club activities in or adjacent to the Club building.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_





**Rhode Island Department of Human Services**  
**Child Care Assistance Program (CCAP)**  
**PARENT/PROVIDER ENROLLMENT AGREEMENT**  
**Tele-enrollment line Phone: 574-8400**

This form is to be used by the parent and the provider when enrolling a CCAP eligible or potentially eligible child at an approved DHS provider. One form must be completed per enrolled child. It must be completed and signed by the parent **and** the child care provider and a copy kept by both parties. It is the **provider's responsibility** to submit this information to DHS using the automated web-based enrollment system **BEFORE** the provider begins caring for the child. The provider is required to give the parent a copy of this agreement at the time of enrollment. Once child care assistance is approved, the parent and the provider will receive a written notice of DHS payment authorization.

**Parent's Certificate Number:** \_\_\_\_\_ **Child's Full Name:** \_\_\_\_\_  
**Parent's Name:** \_\_\_\_\_ **Child's Date of Birth:** \_\_\_\_\_

**This section is to be completed by Providers that are LICENSED CENTERS and/or SUMMER CAMPS.**

**Provider ID/Site:** 23776 **Care Site Name:** Boys & Girls Club of Pawtucket

**This section is to be completed by Providers that are Certified Family CC Homes or legal Non-certified providers.**

**Provider ID:** \_\_\_\_\_ **Care Location:** \_\_\_\_\_ **Child's Own Home**  
 \_\_\_\_\_ **Provider's Own Home**  
**Are You Related to the child?** \_\_\_Yes  No  
**Provider Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

AGREED HOURS OF CARE					
Care Start Date:		Care End Date:		Use this column when child's schedule is a split day	
Day	Start Time	End Time		Start Time	End Time
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					

The undersigned Provider, hereafter referred to as "Provider" agrees to care for the above-named child for the period indicated in this enrollment. Provider further agrees that the days and times the child will attend were agreed upon by the Provider and the undersigned parent of the child. **The undersigned parent certifies that the hours of this enrollment correspond to the hours he/she is engaged in work or FIP approved activity or in travel to and from approved work/activities.**

The Provider agrees to accept the DHS payment based upon the DHS authorization and approval for Full Time, Three Quarter Time, Half Time, Quarter Time or Before and/or After School Care as payment in full and understand that any services provided in excess of authorized hours shall be the sole responsibility of the parent. Provider understands and agrees to accept this payment in accordance with DHS rules and regulations lawfully promulgated in accordance with R.I. General Laws.

The Provider agrees to provide child care in accordance with the DHS rules and regulations and in accordance with the DHS CCAP Approved Provider Agreement.

The undersigned parent agrees to pay his/her share of the child care cost in accordance with the RI DHS rules and regulations and specified in the notice sent by the RI DHS Child Care Assistance Program.

**The Provider and the undersigned parent certify that they DO NOT live in the same household.**

Authorized Provider Signature \_\_\_\_\_ Date \_\_\_\_\_ Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**Confirmation Number** \_\_\_\_\_







**BOYS & GIRLS CLUB  
OF PAWTUCKET**

**2019-20 Pre-Teen Before & After-School Program  
Signature Page**

**Name of Child:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

I have received the Pre-Teen Before & After-School Program packet which includes the Discipline Policy & Procedures document and the Program Handbook.

I have read, understand and agree to abide by the policies and procedures outlined in the Boys & Girls Club of Pawtucket's Pre-Teen Before & After-School Program Handbook.

I have read the Pre-Teen After-School Program Discipline Policy & Procedures and understand they will apply to my child while participating at the Boys & Girls Club of Pawtucket. I agree that my child and I will abide by the Discipline Policy & Procedures.

**It is important to understand all policies and procedures related to our Pre-Teen Before & After-School Program. Please initial below to confirm that you have read and understand these specific policies:**

\_\_\_\_\_ Tuition Policies & Procedures

\_\_\_\_\_ Enrollment & Withdrawal Process

\_\_\_\_\_ Parking Policy

\_\_\_\_\_ Vacation Weeks

\_\_\_\_\_ Report Card Collection

\_\_\_\_\_ Email Address Confirmed: \_\_\_\_\_

\_\_\_\_\_  
*Parent/Guardian Signature*

\_\_\_\_\_  
*Date*





**BOYS & GIRLS CLUB  
OF PAWTUCKET**

## **2019-20 Pre-Teen Before & After-School Program Handbook**

### **Enrollment & Withdrawal**

We welcome you to visit our program at any time. You will be given a tour of the facilities and have an opportunity to observe the Club programs. If at any time we have concerns about a child, the parent/guardian will be asked to attend a conference. Parents/Guardians may ask for a conference with Club staff at any time.

#### *Enrollment:*

- To register and enroll in our Before & After-School Childcare or Drop-in Programs, the following must be completed for each child and on file in the office: the Pre-Teen Before & After-School Program Registration Form, Signature Page, and the membership must be current.
- All participants enrolling in our Before & After-School Childcare or Drop-in Programs will begin on the Monday following the day they register. If the Club is closed on the Monday, your child will begin programs on the next business day.
- All enrollment documents are due by Friday at 12:00 p.m. in order for your child to begin on Monday. ***If paperwork is received after 12:00 p.m. on Friday, your child must wait until the second Monday to begin programs.***

#### *Withdrawal/Disenrollment from Program:*

1. According to DCYF regulations, the Boys & Girls Club of Pawtucket must adhere to a 1 to 13 adult-child ratio for all children, and we take this responsibility seriously. If a child's behavior continually prevents that from occurring, or if a child demonstrates repeated aggressive behavior toward others, the parent/guardian will be requested to withdraw the child, and will be given one week to do so.
2. We reserve the right to suspend a child if the parents/guardians do not cooperate with the Club's policies and procedures.
3. We reserve the right to suspend a child (and/or remove them from the School-Age Childcare Program) after the THIRD occurrence of Late Pickup (after 6:30 p.m.).

### **Membership**

A child **MUST** have a current membership to participate in any programs at the Boys & Girls Club of Pawtucket. If your child's membership expires they will be suspended from the Club and will not be able to return (nor will they be picked-up from school if enrolled in the Childcare Program) until the membership is renewed.

### **Late Pickup Charges**

In order to maintain the safety and quality of our program, Boys & Girls Club of Pawtucket staff will remain at the Club until every participant leaves. Due to this additional service provided, a Late Pickup Charge of \$1.00 per minute incurs for each child who is picked up after 6:30 p.m. We reserve the right to suspend your child from the Club (and/or remove them from the School-Age Childcare Program) after the THIRD occurrence of late pick-up.

### **Food and Nutrition Program**

We know how important it is for each child to have a healthy and nutritious meal each evening so they can take full advantage of our programs. As such, dinner served by the Club is of sufficient quantity and quality to provide for the nutritional needs of each child as established by the Department of Education

Child Care Food Program. Additionally, our menus abide by the State of Rhode Island Department of Health Regulations for the Child and Adult Care Food Program. Menus are available upon request.

### **Health and Safety Program Policies**

#### *Medical History:*

We do not require a copy of your child's immunizations or Pediatric Health Form, however, if there is a medical need we should be aware of, please make note of it on the Pre-Teen Before & After-School Program Registration Form.

#### *Special Needs:*

In the case of a child with special needs, a determination shall be made prior to attending the Club as to the extent those needs can be adequately met by the program. This review will be done by parents/guardians and Club staff, and may involve appropriate specialists. The Director of Pre-Teen Programs shall decide whether or not to admit the child on a trial basis.

#### *Child Abuse/Neglect:*

Suspected cases of child abuse and/or neglect will be reported to DCYF as required by law.

#### *Fire Drills:*

A fire drill and building evacuation will be conducted monthly during the hours of program services.

#### *Illness at the Club:*

Should an emergency arise, the Boys & Girls Club of Pawtucket will make every effort to contact someone at the emergency numbers provided before any medical action is taken. However, in the event an emergency contact cannot be reached, the Club will endeavor to take your child to the hospital listed on your Enrollment Form, choice of hospital however may be limited by service of the local rescue squad.

It is essential that every parent/guardian cooperate fully with the Club's health program policies. When there are symptoms of illness or other indications that a child is not well enough for group activities, arrangements must be made for his/her care at home. The Boys & Girls Club of Pawtucket has no provisions for the care of children who are ill. We do not administer any medications. However, if your child is responsible for taking their own medication, we require written parental authorization and a copy of the prescription label(s) before they can bring the medication to the Club.

Exposure to communicable diseases and any infectious illnesses of other family members should be promptly reported so that the Boys & Girls Club of Pawtucket may be alerted to early symptoms.

A child with a temperature of 101.5°F or higher, rashes, diarrhea, and/or vomiting will be sent home.

#### *Returning after illness:*

The following must be adhered to when returning from an illness:

1. Simple cold: When a child is absent for a simple cold, they may be readmitted to the Club as long as there is no temperature.
2. Temperatures over 101.5°F, diarrhea, and/or vomiting: Following an illness accompanied by a rise in temperature, diarrhea and/or vomiting, a child must be excluded from the Club until 24 hours after the temperature has returned to normal and/or bouts of diarrhea and vomiting have stopped.
3. Unidentified rashes: A child may return to the Club when the office has received a doctor's note stating that they are not contagious and may return to the Club.
4. Chicken Pox: All scabs must be gone before a child returns to the Club.

5. Head Lice: After treatment, a child may return but will be checked by the Director or authorized personnel. During this head check, the parent/guardian may remain with their child. A child must be lice/nit free to remain at the Club.
6. Pink Eye: After treatment, a child must have a doctor's note stating that they are no longer contagious and may return to the Club on file in the office.

*Outside Play:*

Our policy is that if your child is well enough to attend the Club, they are well enough to join other children in the daily outside play.

Children may go outside every day when the temperature is 32 degrees Fahrenheit or above. Please dress your child accordingly.

### **Drop-Off & Pick-Up Policy**

*Drop-Off & Pick-Up/Sign-In & Sign-Out:*

All children must be brought into the building and signed in daily BY A PARENT/GUARDIAN (or other adult on the authorized list provided on the Pre-Teen Before & After-School registration form). At the end of the day, an authorized PARENT/GUARDIAN (or other authorized adult) must come into the Club and sign-out their child (presenting photo ID if requested by program staff).

For safety reasons we need to know where a child is at all times. Children may not be dropped off in the parking lot. Additionally, we will not dismiss a child unless an adult is in the building; do not call and ask us to send your child outside to meet your car.

*Emergency Contacts & Authorized to Pick-Up:*

Children will be released only to those persons whose names are listed on the Pre-Teen Before & After-School Program Enrollment Form as authorized to pick-up – this form must be updated annually. Omitting a name previously provided from this form DOES NOT remove them from your authorized pick-up list. You must notify us in writing if you wish to remove an emergency contact or person authorized to pick-up who you have previously listed for your child. Your child's authorized pick-up and emergency contact lists are available upon request. Children are only released to individuals, 18 years or older, who are not under the influence. If contact numbers are changed please let us know immediately so that we can reach you or your emergency contacts should the need arise.

Parent/Guardian must bring in a copy of any custody or restraining order relating to the child. Parents/Guardians are to advise the office in writing or call in advance if a person not listed on the emergency form is to pick up the child; positive identification must be shown at the time of pickup and no child will be released to anyone without Club staff members verifying their identity with a photo ID. Any changes to the pick-up list must be verified with the primary contact listed in the system before they are authorized to pick-up.

### **Parking Policy**

All visitors to the Club, including those dropping-off and picking-up children are expected to follow our parking rules for the safety of all Club members and guests.

We have ample marked parking spaces in both the upper and lower parking lots at the Club. Any of the drives as you enter the Club and the front circle area are not for parking – this includes stopping to let your child in and out of the car. Anyone who is found parking or stopping on any of the drives or in the front circle will be subject to consequences up to and including suspension of your child's membership

at the Club. The parent/guardian who completes the Pre-Teen Before & After-School Program registration paperwork is responsible for notifying all those who they authorize pick-up of this policy.

### **Weather**

IMPORTANT: During freezing rain, icy road conditions, etc., the Club typically closes when the Pawtucket School Department closes. Always phone ahead to see if the Club is open! The Boys & Girls Club of Pawtucket will also announce on all local media and Club social media platforms of program cancellations. Parents/Guardians, or a designated representative, must pick up their children upon announcement of program cancellations within one (1) hour of said cancellation.

### **What to Bring, What Not to Bring & What to Wear**

Clothing that is easy to manage encourages independence and self-help. Many toilet accidents are prevented if children can unbutton or unbuckle their pants and belts without a struggle.

All jackets, sweaters, coats, hats, boots, mittens, purses and umbrellas must be clearly marked with the child's name. Many children wear identical clothing and without a name in each garment, it is almost impossible for program staff to identify to whom it belongs. The Club is not responsible for any damaged, lost, or stolen items.

A sweater or jacket at the Club is recommended since the temperature changes throughout the afternoon.

#### *What not to bring to the Club:*

1. Candy and other goodies: We do not recommend sending these items except on special occasions. If they are sent, prior arrangements must be made with the program staff.
2. No guns, knives, or any other kind of weapon will be allowed.
3. Children may not bring cell phones, electronic games, etc. to the Club. We are not responsible for any item that may be lost, broken or stolen.
4. There will be no contraband materials allowed at the Boys & Girls Club of Pawtucket.

#### *Birthdays:*

A birthday is a special day. The Club will always acknowledge each child's birthday. If the parent/guardian wishes to provide a special treat on this day, please make arrangements with the program staff. All food must be in a store bought sealed package.

### **Report Card Collection**

Among the many services available during our after-school program, we provide a wide variety of homework help and academic support programs. In order for us to assess and monitor the academic needs of our members and provide appropriate tutoring and academic services, the Boys & Girls Club of Pawtucket would like to collect the report cards and NECAP scores for your child. Please alert us if you would not like to share this information. We will communicate in advance of each report card release to remind you of our intention.

### **Orientation and Staffing Guidelines**

All childcare staff are required to comply with the DCYF regulations concerning Employment Background Checks, CANTS clearance, immunizations, and qualifications. These records are kept on permanent file with our personnel records. A copy of our Staff Policies & Practices document is available upon request.

### **Additional Club Program Details**

The Club will be closed for the following School Year holidays – there will be no programming on these dates (additional dates may be added to the calendar throughout the year):

- Monday, September 2, 2019: Labor Day
- Friday, September 27, 2019: All-Staff Training Day
- Monday, October 14, 2019: Columbus Day
- Monday, November 11, 2019: Veterans Day
- Thursday, November 28 – Friday, November 29, 2019: Thanksgiving Break
- Sunday, December 22 – Saturday, December 28, 2019: Winter Break
- Tuesday, December 31, 2019: New Year's Eve
- Wednesday, January 1, 2020: New Year's Day
- Monday, January 20, 2020: Martin Luther King, Jr. Day
- Monday, May 25, 2020: Memorial Day

Additionally, there will be limited hours for Drop-In Program participants during the Vacation weeks.

Program surveys will be administered to Club members (ages 9-18) in March. Program surveys will be administered to parents/guardians of Club members during the school year. Information relating to these surveys is available upon request.

### **Contact Information**

Director of Pre-Teen Programs  
Cherima Folston, x827  
cfolston@bgcpawt.org

Pre-Teen Program Coordinator  
Shirley Rodriguez, x817  
srodriguez@bgcpawt.org

Boys & Girls Club of Pawtucket  
401-722-8840, Option 1  
www.bgcpawt.org

### **Childcare Program Only**

***In addition to all other policies noted above, the following additional policies and procedures apply to participants in our School-Age Childcare Program.***

#### **Tuition Policies & Procedures**

*Tuition:*

\$45/week for Before-Care; \$90/week for After-Care; \$130/week for Before & After-Care  
\$50/week for Before-Care; \$95/week for After-Care; \$140/week for Before & After-Care (Kindergarten)  
*DHS Reimbursement Accepted*

Tuition is based on enrollment and not attendance. Unless you notify us otherwise as noted in the Absence from the Program as noted below, you will be charged in full for any weeks in which you are enrolled, regardless of your attendance.

Parents/Guardians are responsible for all communications with DHS regarding any questions about their benefits and eligibility.

*Tuition Payment Days:*

Monday - Friday

(Cash is taken at the front desk only during office hours: 8:30 a.m. - 6:00 p.m.)

*Payment Methods:*

Check, Cash, Money Orders, Visa/MC

*Payment Due Dates:*

All payments are due by Friday for the following week. Before your child's first day of attendance, the fee for the first week must be paid in full. (*DHS co-pays are due by Friday of the week attended.*)

*Late Payment Fee:*

Our expectation is that parents will pay weekly. We allow a two-week grace period on your weekly Childcare Program fee. However, after the second week of non-payment you will be discharged from the program. Your child will not be able to return until the bill is paid in full, or an appropriate payment plan/arrangement has been made. The Club will notify the school that the child will not be picked up.

*Responsible Parent/Guardian:*

The person responsible for paying the bill is the parent/guardian who enrolled the child in the program and signed the enrollment form. We can provide itemized statements upon request.

*Absence from the Program:*

If your child is going to be absent from the Club's School-Age Childcare Program, it is required that you notify the Club in writing.

*Non-Sufficient Funds (NSF) Check Charge:*

1. For the first NSF check: A \$25.00 charge will be added to your bill. This \$25.00 charge plus the amount of the NSF check must be paid in full with cash, money order or credit card within one week of receiving the NSF check. If this amount is not paid, we will follow the Late Payment Fee schedule.
2. For the second NSF check: A \$30.00 charge will be added to your bill. This \$30.00 charge plus the amount of the NSF check must be paid in full with cash, money order or credit card within one week of receiving the second NSF check. If this amount is not paid, we will follow the Late Payment Fee schedule.
3. After the third NSF check, all bills must be paid with cash, money order or credit card for the remainder of the school year.

### **Enrollment & Withdrawal**

*Enrollment:*

- In addition to all documents listed above, participants in the School-Age Childcare Program must not have an outstanding balance (unless a payment plan is in effect), and provide payment for the first week of the program before they can be enrolled in the program (DHS payment is an exception).

*Withdrawal/Disenrollment from Program:*

1. The person who enrolls the child must be the person who removes them from the program, giving the office one week's notice in writing.
2. Any child absent for two consecutive weeks, without notification to the office, will be considered withdrawn. If you would like to withdraw your child, please notify the office as soon as possible to avoid extra charges.



3. We reserve the right to remove a child if the parents/guardians do not cooperate with the Club's School-Age Childcare Program policies and procedures.
4. We reserve the right to remove a child if payments are not made when due. Please see our payment policies.

#### **School Early Dismissal**

If school is dismissed early due to teacher in-service or other non-weather related events, Childcare Program participants will be picked up upon dismissal and brought back to the Club for regular programming.

If school is dismissed early due to inclement weather, the Club will also be closed and there will be no pick-up at school for Childcare Program participants.

#### **Vacation Weeks**

The Pawtucket School Department vacation weeks in December (December 23, 2019 – January 3, 2020), February (February 17-21, 2020), and April (April 13-17, 2020) are not considered part of the Club's School-Age Childcare Program and your child WILL NOT be automatically enrolled in these weeks. If you wish to have your child attend during these weeks, you will need to complete a Vacation Week Registration form to secure your spot. If you do not register in advance, we may not have a space available for your child.

#### **What to Bring, What Not to Bring & What to Wear**

*What to bring to be left at the Club:*

1. Kindergarten Program participants should have a change of clothes: pants and shirt or dress, socks and underwear. The child's name must be on each item.