



DIVINE WISDOM CATHOLIC ACADEMY

Miriam Bonici
Principal

Divine Wisdom Catholic Academy Extended Day Program 2023-2024 School Year

- Time:** 7:00am to 8:00am and 2:20pm to 6:00pm
- Eligibility:** Students registered in **Divine Wisdom's** 3K and Pre-K Programs
- Registration Fee:** \$25 per family per school year. **Registration ensures information is on file should the program be needed on an emergency basis.**

Monthly Rates for Before School Program: The monthly flat rate is due the first of each month and no refunds can be given for days missed. The rate is from 7:00am to 8:00am for Pre-K \$60.00 and 7:30am to 8:00 for 3K \$75 per month per child. Daily rates are not available for the before school program.

Monthly Rates for After School Program: The monthly flat rate is billed through FACTS tuition management. No refunds can be given for days missed rate is from 2:20pm to 6:00pm and is Pre-K \$400.00 per month, 3K \$450.00 per month with approval from the office.

Per Diem Rates for After School Program: Daily fee will be billed through FACTS Tuition Management the following week.

Time	Per Child
2:20pm to 4:00pm	Pre-K- \$20.00 / 3K-\$20.00
2:20pm to 6:00pm	Pre-K- \$35.00 / 3K-\$40.00

The program ends at 6pm promptly, please note that an additional \$30 fee will be imposed if your child is not picked up by 6pm.

Activities: Students will be supervised in various indoor and outdoor physical recreation. A small snack and drink are provided daily during the after school program. You may supply your own additional snack if you feel your child needs it.

Communication: If your child is scheduled to use the Program and you decide to pick him/her up at dismissal you must inform the school office, many times we are looking for children who have already left with a parent. **Call the school office should you need the services of the After School Program in an emergency. Please note that if your child is not previously registered, you will be required to register and pay the registration fee in addition to the daily charges.**



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3K and Pre-K EARLY MORNING DROP-OFF/AFTER SCHOOL PROGRAM REGISTRATION FORM

My Child will attend:

_____ **Early Drop-off**
_____ **Afterschool**
_____ **Both**

Child/ren's Name(s) and Grade(s)

1. First Name: _____ Last Name: _____ Class: _____

2. First Name: _____ Last Name: _____ Class: _____

My child/ren will attend:

A. On a monthly basis: Yes _____ No _____ (Monthly rate charged at beginning of month)

B. On a per diem basis: Yes _____ No _____ (Days attended charge at the end of week)

Day/s _____

Mother's Name: _____ **Home/Cell Phone:** _____

Father's Name: _____ **Home/Cell Phone:** _____

Pick up Emergency Contact (Adult other than parents that can pick up students)

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Medical information:

Allergies: _____

Who CANNOT pick up child (Court documentation must be on file in the office)

Name: _____ Relationship: _____

Name: _____ Relationship: _____