



DIVINE WISDOM CATHOLIC ACADEMY

Michael A. LaForgia
Supervising Principal

Divine Wisdom Catholic Academy Extended Day Program 2016-2017 School Year Students in Full Day Pre-K Only Bayside and Douglaston Campus

- Location:** Academy Facilities at 56-10 214th St. Bayside and 45-11 245th St. Douglaston
- Time:** 7:00am to 8:00am and 2:20pm to 6:00pm
- Eligibility:** Students registered in **Divine Wisdom's** Pre-K Program
- 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 (*Nursery Students not Eligible*): 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 and is \$50 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 due the first of each month and no refunds can be given for days missed. The rate is from 2:20pm to 6:00pm and is \$350 per month for the first child and \$250 for a second child.

Per Diem Rates for After School Program: Daily fees must be received on the first day of the week or on the day of attendance. In the event of an emergency, payment must be made at the time you pick up your child.

Time	Per Child
2:20pm to 4:00pm	\$15
2:20pm to 6:00pm	\$30

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 whom have already left with a parent. It is now possible to accommodate telephone requests for placement into the Program during the school day. **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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PRE-K EARLY MORNING DROP-OFF AFTER SCHOOL PROGRAM REGISTRATION FORM

Early Drop-off

After-School

Both

(\$25.00 Family Registration Fee Must Accompany this Form)

Family Name: _____

Number of children planning to attend: _____

Child/ren's Name(s) and Grade(s) 1. _____

2. _____

My child/ren will attend:

A. On a monthly basis: Yes _____ No _____

Day/s _____

B. On a per diem basis: Yes _____ No _____

Day/s _____

Mother's Name: _____

Home Phone: _____

Business Phone: _____

Cell Phone: _____

Father's Name: _____

Home Phone: _____

Business Phone: _____

Cell Phone: _____

Emergency Contact (other than parents):

Name: _____

Relationship: _____ Phone: _____

Child/ren medical information:

Allergies: _____

Physical Limitations: _____