

# Imprints Cares

*A Premier Before & After School Program™*

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## Meadowlark Middle

### 2011 – 2012

Enroll your middle-schooler in our before and after school program brought to you by Imprints. ***Students will be supervised at the school site by the school staff.*** The program includes a snack, time dedicated to homework, play, relaxation and special activities.

***Where-*** School Site

***Counselors-*** School Staff

***Hours of Operation:*** Every day school is in session  
Afternoons: End of school day to 6:00 pm

***Cost-*** \$40 nonrefundable registration fee  
\$200 per month, per student, afternoons only  
“Drop-in” services available upon request

#### ***To Register***

- Contact Janelle Williams, Imprints Cares Administrator, at 336-722-6296 Ext 223 or [jwilliams@ImprintsCares.org](mailto:jwilliams@ImprintsCares.org)
- Applications available at school office
- Open House – August 2011
- Registration begins July 5th



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## **Program Information** *Imprints Cares After School Care*

### **Middle Schools of Operation**

Meadowlark Middle

### **Hours of operation**

Afternoons: End of school day until 6:00 pm

### **Pick Up Policy**

Students must be picked up by 6:00 pm.

### **Fees**

**Do not send payments with your students to school.**

\$40 nonrefundable registration fee

\$200 per month, per students, afternoon only

“Drop-in” services are available upon request.

*Sibling discount: \$10 per sibling*

**Please choose the following options for payments:**

- Personal/certified check, money order or cash dropped in the locked box at the school
- online payments through our website including monthly draft
- mail payments to Imprints office

**Payments are due the last day of the month for the upcoming month of students care.**

(ex. September payment due August 31<sup>st</sup>).

*Receipts for payment and tax information will be emailed/mailed to parent who is listed as responsible party.*

### **School closings/late openings due to inclement weather**

- **When school is closed due to inclement weather, the after school program will be closed.**
- When school is dismissed early due to inclement weather, the after school program will operate. **Parents will be contacted if conditions continue to worsen.**

### **Teacher Workdays**

Care will be provided when students are out for teacher workdays at no additional charge.

**No care will be provided on days that are designated by the school system as holidays.**

We look forward to serving you and your family! Please contact us if you have any questions.

Janelle Williams  
Imprints Cares Administrator  
336-722-6296 Ext 223  
[jwilliams@ImprintsCares.org](mailto:jwilliams@ImprintsCares.org)



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## **Discipline Policy** *Imprints Cares After School Care*

Imprints Before and AfterSchool Care is committed to providing a nurturing, relaxing and safe environment for students before and after school. We make every effort to help students complete their homework, understand areas where they might need extra help, and enjoy new and fun experiences.

The safety of your student is important to us. In order to provide a safe and enjoyable experience for all students, positive behavior is expected from everyone. Students are expected to follow directions of the adult in charge. Students are expected to remain in the appropriate area with the group to which they are assigned. A student who repeatedly breaks school and AfterSchool Care rules will be given a written discipline action form and will be in danger of being released from the program as follows.

### **First Discipline Notice**

After several verbal warnings to the students, parents will receive written notification that their student has been disruptive in the program, with the indication that a long-term change in behavior is expected from the student.

### **Second Discipline Notice**

If no long-term behavior changes are exhibited by the student after the first notice, a second notice will be sent. The student will also be suspended from the program for three days after the second notice.

### **Third Discipline Notice**

If the student's behavior does not improve, a third notice will be sent. The student will also be suspended from the program for five days after the notice.

### **Fourth Discipline notice**

If the student's behavior does not improve, a fourth discipline notice will be sent home, and the student will be permanently removed from AfterSchool.

Please note: NO refunds are given for time spent on suspension from the program, or if the student is permanently removed from AfterSchool.

### **Severe Clause**

In the event of fighting, excessive bullying, use of profanity or disrespect to adults, a student may be expelled from AfterSchool without a prior discipline notice. The length of the suspension will be based on the severity of the incident and at the Program Director's discretion.

If you have any questions about our discipline policy, please contact us. We look forward to serving you and your family!

Janelle Williams  
Imprints Cares Administrator  
336-722-6296 Ext 223  
[jwilliams@ImprintsCares.org](mailto:jwilliams@ImprintsCares.org)



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Meadowlark Middle  
**Application**  
*Imprints Cares After School Care*

### Student's Information

Student's school: \_\_\_\_\_ grade \_\_\_\_ teacher \_\_\_\_\_

**STUDENT'S NAME** \_\_\_\_\_

Student's Address \_\_\_\_\_

City \_\_\_\_\_ ZIP \_\_\_\_\_ Home phone \_\_\_\_\_

Father's Information

Name \_\_\_\_\_ daytime/cell phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Mother's Information

Name \_\_\_\_\_ daytime/cell phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

### Services Requested

Start Date \_\_\_\_\_

**Full-time:**

\_\_\_\_\_ PM only

**Drop - in:**

Please call 722-6296x223 for pricing and level of service

### Emergency Information

Medical issues (known allergies, medication, etc.) \_\_\_\_\_

Hospital Preference: \_\_\_\_\_ First contact in case of emergency \_\_\_\_\_

Additional people who are authorized to pick up my students from Imprints Cares AfterSchool Care:

Name \_\_\_\_\_ phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ phone \_\_\_\_\_ Relationship \_\_\_\_\_

Custody issues \_\_\_\_\_

For your students to be enrolled all boxes must be checked.

- I have read, agree to, and will adhere to the financial terms.
- I have read and will support the discipline policy.
- I have read the program information page.
- My signature indicates I am responsible for payment and will keep the account current.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date



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## Financial Term Agreement Reminder

*Imprints Cares After School Care*

Student's Name: \_\_\_\_\_

Upon enrolling my students in Imprints AfterSchool Care, I understand and agree to the following:

I am enrolling my student in the Imprints program and am therefore considered the responsible party. \_\_\_\_\_ (initial)

I agree to pay the specified nonrefundable registration fee. \_\_\_\_\_ (initial)

**All payments are due the last day of the month for the upcoming month of students care, with a two-day grace period.** Failure to pay may result in dismissal of your students from the program. \_\_\_\_\_ (initial)

Charges for late payment: 1<sup>st</sup> late payment - No charged assessed  
2<sup>nd</sup> late payment - \$25 fee charged to account  
3<sup>rd</sup> late payment - dismissal from program until outstanding balance  
Is paid in full

I will abide by the schedule of charges for late payments. \_\_\_\_\_ (initial)

Returned checks are considered a delinquent payment regardless of when they are received. Staff will notify parents of a returned check. I will be assessed up to a \$25 service charge for any returned check. \_\_\_\_\_ (initial)

My students will be removed from the program after two returned checks. \_\_\_\_\_ (initial)

**No credit or transfers are given for absences or snow days.** \_\_\_\_\_ (initial)

I will notify Imprints Cares at [jwilliams@ImprintsCares.org](mailto:jwilliams@ImprintsCares.org) 2 weeks prior to withdrawing my students from the program. \_\_\_\_\_ (initial)

My students may be removed from the program if I do not adhere to these terms. \_\_\_\_\_ (initial)

I certify that I have read the financial agreement and agree to the terms as described.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

Please call with questions:

Janelle Williams  
Imprints Cares Administrator  
336-722-6296 Ext 223  
[jwilliams@ImprintsCares.org](mailto:jwilliams@ImprintsCares.org)