



STAY AND PLAY!

AFTER SCHOOL EXTENDED CARE

For the 2023-2024 School Year

Need some extra time to relax, run errands, or finish up work?

Ms. Crystal and Ms. Jamie are here to provide our COJ! friends an afterschool program to relax, have fun and play with friends while promoting and reinforcing social, emotional, and physical development in a safe, friendly, and nurturing environment.

- Fun & Engaging Activities
 - Arts & Crafts
 - Science Experiments
 - Decorating Desserts
 - Music, Games, etc....
- Indoor/Outdoor Play
- Afternoon Snack

For more information or to register, Email Ms. Crystal or Ms. Jamie at TheWuestes2002@gmail.com or jhbeever@gmail.com

*For the extend care program to begin on the requested day, we must have a minimum of 5 kids.
Additional information on the back.

2:00 p.m. – 2:45 p.m.

3 and up*	3 and up*
Monday Only	Tuesday Only
\$60.00 per month**	\$70.00 per month**

**Plus, a supply fee of \$25.00 per semester

3 and up*
BOTH Sessions
\$120.00 per month**
Save \$10.00 per month by signing up for 2 days
**Plus, a supply fee of \$50.00 per semester

Stay and Play After School Extended Care

Please indicate which day(s) you would like for your child to attend. All sessions are from **2:00 p.m. to 2:45 p.m.** afterschool.

Session A- Mondays ONLY (There is no Monday sessions on Dec. 11th, 2023 and May 13th, 2024) **\$60.00** per month for **25** Mondays (No payment will be required for Dec. and May.) →

Start Date 9/11/23 End date 5/6/24

Session B- Tuesdays ONLY (There is no Tuesday sessions on Dec. 12th, 2023 and May 14th, 2024) **\$70.00** per month for **27** Tuesdays (No payment will be required for Dec. and May.) →

Start Date 9/12/23 End date 5/7/24

Session C-Both Mondays and Tuesdays (There is no Monday sessions on Dec. 11th, 2023 and May 13th, 2024, as well as, no Tuesday sessions on Dec. 12th, 2023 and May 14th, 2024) **\$120.00** per month for **52** sessions. (No payment will be required for Dec. and May.) →

Start Date 9/11/23 End date 5/7/24

Participant Information

Participant Name: _____ Age: _____

Date of Birth: _____ Gender: _____ COJ! Class: _____

Please list **all** allergies: _____

Parent/Guardian Information

Parent/Guardian Name: _____

Address: _____ Phone Number: _____

Emergency Contact

Emergency Contact: _____

Emergency Contact Number: _____

Child's Family Physician **MUST HAVE BOTH**

Doctor: _____ Phone Number: _____

- We kindly ask that you commit to the extended care program for the whole school year. The session you sign up for will be your child's session for the entire school year unless prior arrangements have been **APPROVED** by **BOTH** Ms. Crystal and Ms. Jamie.
- We will follow the COJ! calendar regarding holidays, breaks, & inclement weather.
- Payment is due on the 1st of each month. **Payments are considered late on the 5th and will be assessed a \$15.00 late fee.**
- Payment options: **cash, checks** payable to: **Children of Joy**, or remit payment through your **COJ! account**.
- There are no make-up days or refunds for missed classes.
- Withdrawing your child from the program requires a 7-day written notice prior to the withdrawal.
- Classes end promptly at 2:45. We are unable to supervise students after this time due to clean up activities.
*A late fee of \$1.00 per minute will be incurred for late pick up.

Emergency and Liability Release

- **I will not hold** Crystal Wueste, Jamie Beever, Children of Joy! Preschool, Spirit of Joy! Lutheran Church, and/or their staff responsible for accidents, claims, and/or damages arising from my child's participation in Stay and Play After School Extended Care program.
- I give my consent for necessary emergency treatment when my child is in the care of any emergency medical services, physicians, and/or hospital.
- In the event I cannot be reached to make emergency medical treatment for my child, I authorized the staff person(s) in charge to take my child to the following physician or nearest emergency treatment center as needed.
- Signing this form indicates I have read it in its entirety and agree with the terms set forth.

Signed: _____ Date: _____

Relationship to child: _____

Email: _____