



After School Program

PARENT HANDBOOK



Welcome to the Cross Plains
Parks and Recreation Department
After School Program

Our Program

The Cross Plains Parks and Recreation Department's After School Program will be held at the Cross Plains- Berry Fire Station. The program provides a supervised recreational outlet for children ages Kindergarten – 4th Grade. Children will participate in a variety of engaging activities which will include crafts, sports and games, as well as have the option of a quiet space for homework or passive activities.

WHO CAN ATTEND

We serve families attending the Middleton-Cross Plains School District, primarily Park Elementary.

WHERE WILL THE PROGRAM BE HELD?

The program will be held at the Cross Plains-Berry Fire Station.

REGISTRATION PROCESS

Participants may sign up with the following process:

- ✚ Online Sign-up (www.cross-plains.wi.us)
- ✚ Over the Phone (608.798.3241 ext. 104)
- ✚ Mail-In (P.O. Box 97, Cross Plains, Wi 53528)
- ✚ After Hours Drop Box (2417 Brewery Road, Cross Plains, Wi 53528)

Participants must pre-register and pre-pay for each month of the school year; registration must be received one week prior to the start of the month. If there is additional space available, late registration will be permitted at no additional cost. Each month, you have the option to choose the days you need which you're able to change monthly. Available options and costs associated with said options:

3 Day Option (12 Days)	Cost (per child)	5 Day Option (School Days)	Cost (per child)
September	\$192.00	September	\$300.00
October	\$192.00	October	\$300.00
November	\$192.00	November	\$265.00
December	\$192.00	December	\$225.00
January	\$192.00	December	\$300.00
February	\$192.00	February	\$300.00
March	\$192.00	March	\$275.00
April	\$192.00	April	\$300.00
May	\$192.00	May	\$300.00
June	\$48.00	June	\$75.00

Welcome to the Cross Plains
Parks and Recreation Department
After School Program

SCHEDULE CHANGES

Each month when you register, you can choose to stay with your current enrollment choice, or you can choose different days for that month. Once you sign up for that month, you won't be allowed to make a change.

WITHDRAWAL FROM PROGRAM

If you need to withdraw during the school year, please notify us as soon as possible. Once the program for the month begins, you will not be given a refund. If you have pre-paid for months in advance, you will be refunded for those months.

PARTICIPANT REQUIREMENTS

Children must be the appropriate age and enrolled in the Middleton-Cross Plains School District. Participants must be potty trained and self-sufficient for all toileting needs.

ARRIVAL AND PICK UP

Each day your child will be greeted off the bus and checked in by our trained staff. Children will only be released to the person(s) listed on their emergency form. If someone other than the individual(s) listed on your emergency form will be picking up your child, a phone call MUST be made to notify staff. For the safety of your child, staff will ask for a photo ID from anyone they do not recognize as an authorized pick up person. Please use the parking lot on the east side of the fire station when picking your child up.

LATE PICK UP

A \$10.00 late fee will be assessed for every 15 minutes of tardiness. Continued late pick ups may result in dismissal from the program. Please contact staff if you anticipate being late so that they can be aware and notify your child.

SIGN OUT TABLE

An authorized pick-up person must come inside to sign their child out of the building. We will not allow your child to leave the building alone. It's at this table that you will be given important information regarding any changes to the program, days off, field trips or special events.

ATTENDANCE/ABSENCE/ILLNESS

Reporting your child's absence from the program is essential to ensuring safety and accountability of all participants. Refunds will not be given for days missed due to injury, illness or vacations.

Welcome to the Cross Plains
Parks and Recreation Department
After School Program

SCHOOL DAYS OFF

After School Program will offer Days Off care options for your family. Separate registration and payment is required for these days.

Days off programs will run 7:30 am - 6:00 pm and will include supervised play, field trips or special activities. For more information or to sign up, please go to www.cross-plains.wi.us and click on Recreation.

HOLIDAY/SNOW DAYS

The After- School Program follows the Middleton-Cross Plains School District calendar. The program will NOT be in session on days when schools are closed due to inclement weather or emergencies.

The program will not be offered on the following holidays: New Year's Eve, New Year's Day, Memorial Day, Labor Day, Thanksgiving Day and the day after, Christmas Eve Day and Christmas Day and the day after.

WHAT TO BRING

Clothing

- ✦ Activities will be planned for both indoors and outdoors, so please plan accordingly for the weather and season. We will be outside as much as possible, but will also offer active play in the fire station. (Upstairs)

Food

- ✦ Snacks will not be offered for this program. Personal items may be brought from home but are the responsibility of the child.

MEDICATION

Children requiring any type of medication must have a signed medication consent form on file. This form is available upon request. Medication cannot be administered without the consent form. Parents MUST provide the After- School Coordinator with the child's medication in the original container including the label with the doctor's name, patient's name, pharmacy, type of medication, strength, and dosage on it. Medication and instructions must be given to the Coordinator.

BEHAVIOR CODE OF CONDUCT

It is the responsibility of the parents to discuss the Code of Conduct with their child and to reinforce the importance of appropriate behavior at the After- School Program each day.

Welcome to the Cross Plains
Parks and Recreation Department
After School Program

PARTICIPANT EXPECTATIONS

- ✦ Respect all participants, staff and property
- ✦ Take direction from staff
- ✦ Refrain from using negative or foul language
- ✦ Do not cause bodily harm to self, other children or staff
- ✦ No bullying

Parents will be notified of any behavior problems. If there are repeated incidents or greater concern, staff will contact parents and schedule a meeting. If behavior is seriously affecting the After-School Program, or endangering the safety of staff or other children, the child will be permanently removed from the program.

DISCIPLINE PROCEDURE

- ✦ The child will be given a verbal warning by staff
- ✦ The child will be given a timeout.
- ✦ The child will lose a privilege
- ✦ The child will receive a conduct report with an explanation of the behavior consequence
- ✦ A phone call to parents if the behavior is severe or consistent
- ✦ The child will be permanently removed from the program

BEFORE AND AFTER SCHOOL STUDENT INFORMATION FORM 2017-2018

Child's Name: _____ School: _____ Start Date: _____

Birth Date: _____ Age: _____ Grade: _____ Gender: Male/Female

Address: _____ City: _____ Zip: _____

PARENT/GUARDIAN INFORMATION

Parent Name: _____ Number: _____ Email: _____

Parent Name: _____ Number: _____ Email: _____

AUTHORIZED PICK-UP/EMERGENCY CONTACT INFORMATION

Parent Name: _____ Relationship: _____ Number: _____

Parent Name: _____ Relationship: _____ Number: _____

Parent Name: _____ Relationship: _____ Number: _____

SPECIAL ACCOMODATIONS

Please list any special needs, allergies, chronic illness, medications/dosages and time, medical information or accommodations (i.e. ADA) and any additional information necessary to understand and care for your child.

WAIVER AND RELEASE OF ALL CLAIMS

If registering on-line or via fax, your on-line or facsimile signature shall substitute for and have the same legal effect as an original signature.

Parent/Guardian Signature: _____ Date: _____

PARENT HANDBOOK ACKNOWLEDGEMENT

I recognize and acknowledge that I have read and understand the Before and After School Program Parent Handbook. I agree to adhere and abide by the policies and procedures outlined in the handbook. Additionally, I will review the policies and procedures with my child to ensure their success in the program.

Parent/Guardian Signature: _____ Date: _____

Welcome to the Cross Plains
Parks and Recreation Department
After School Program

Child Information Sheet

Name: _____
(Please Print)

Nicknames: _____

Is this your child's first experience in an After-School Program? _____

If no, please explain: _____

Tell us about your child's personality: _____

What does your child like to do for fun? _____

Is there anything else that you would like to share with us about your child? _____
