



TO: PARENTS OF CHILDREN IN NEED OF SUMMER CARE
FROM: CINDY KARRIKER AND STAFF
SUBJECT: SUMMER CARE REGISTRATION PACKET
DATE: 2/21/2019

PARENTS,

Thank you for choosing the Mooresville Graded School District's Before & After School Summer Care Program. Attached you will find all the forms to enroll a child that is currently active in BASP for **Summer Care 2019**.

If your child was not enrolled in our program for the regular school year 2018-2019 please fill out a regular application in addition to this summer enrollment packet, located on the Registration, Enrollment and Medical Forms section of the website.

<https://www.mgsd.k12.nc.us/departments/before-and-after-school-program>

This regular application is **required prior to acceptance** into the summer care program. All information needs to be filled out in its entirety and returned to your site director (with a \$25.00 yearly registration fee for those students **not** currently enrolled with BASP, this is separate from the deposit) as soon as possible but no later than March 29, 2019.

THE PACKET INCLUDES THE FOLLOWING:

1. WELCOME TO SUMMER CARE 2019 LETTER, SUMMER AMENDMENTS, SITE MAP
 2. SUMMER CARE REGISTRATION FORM (Please print clearly) (80 student slots are available)
 3. FIELDTRIP CARD (**TWO PART, PLEASE FILL OUT BOTH SECTIONS**),
 4. SUNSCREEN/Topical Ointment PERMISSION FORM
 5. **FIELD TRIPS Will not be published until Summer Care Starts due to the fact that most of our reservations can not be confirmed this early.** Some of the possibilities from past summers have included swimming, bowling, On-Site presenters, Baseball game, Aquarium, visits to the animals (several different possibilities) Laser Tag, Greensboro and Durham Science Centers, and Tweetsie Railroad. As soon as the fieldtrips are confirmed we will post the list on our web page.
- ✦ **Please be aware that we will operate Summer Care at East Mooresville Intermediate School for K – 6th.**
 - ✦ **The South, PV, MIS and RR BASP sites will be closed for the summer.**
 - ✦ **Enrollment is on a first come first serve basis. You will receive an email confirmation notice to verify that your application and deposit have been received and that we have reserved a space for your child or that you have been placed on the waiting list.**

**BASP SUMMER CAMP WILL BE
CLOSED JULY 1-5, 2019**



IMPORTANT INFORMATION FOR SUMMER CARE

There will only be one site operating for summer care this year.

We will be at East Mooresville Intermediate School located at 1711 Landis Hwy.

June 12-28, July 8-26, 2019

Tuition bills/invoices will come out once this summer. Tuition will be line itemed by the week(1-6) on your invoice. Tuition is a flat rate, no refunds or adjustments. There will be a \$25.00 registration fee for those students **not** enrolled in BASP during the 2018/19 school year and is due at time of application. It is a requirement that you place a \$100.00 non-refundable deposit when you register for the Summer Care program. This amount will be applied to your account at the end of the **last full week of care** and is due at time of registration to secure your child's spot. The **Full Time rate is \$160.00 and Part Time rate is \$130.00 per week.** Tuition payments are due **the Friday before the scheduled week of care.** If tuition payment is not received by Friday, care may be denied on Monday when you arrive to drop off your child. The **summer tuition payments** will be accepted at the summer care site again this year or you may use the Online School Payment system.

Your June/July bill will be **EMAILED** the week of May 14th, so please check your email frequently during that week.

Summer Applications and Deposit Fees are to be remitted to:

Payable to: BASP

1438 Coddle Creek Hwy

Mooresville, NC 28115

And may be paid in person or online.

Weekly fees may be paid on site once Summer Care starts.

****All students must arrive no later than 9:00 A.M.** If your child is not here by 9:00 you will be turned away for the day. Our activities begin at 9:00 and we want the children to have the time to enjoy themselves and not miss out on anything. The teachers have full classes, when a child arrives late this disrupts the activities and the teacher has to re-teach/explain everything that has been done up to that point making the other children wait, and causing them to redo attendance and lunch counts which are due by 9:15 every day. Exceptions to the arrival time will be: on fieldtrip days when we must leave earlier (students must arrive **no later** than the time posted at the sign in/out table on these days, we will not hold the bus), or if you have a doctor or dentist appointment – please let us know in advance and bring a school note from the appointment. **

The last day for students **at** South, PV, RR & MIS for this school year is Friday June 7, 2019. **Wednesday June 12, 2019, South, Park View, Rocky River and MIS students attending Summer Care will need to attend East Mooresville Intermediate BASP.** Parents of South, PV, RR and MIS students, please make sure all arrangements have been made in advance so that records can be transferred for the summer. Care will resume at South, PV, RR and MIS August 6, 2019 at 6:30 A.M.

Summer 2019

WE WILL BE CLOSED THE WEEK OF JULY 1-5, 2019

You may add, change weeks or withdraw, **all in writing**, from this Summer Care plan up to **May 3rd**, without penalty. Any students **added after May 3rd** will be charged a \$10.00 processing fee. **Deposits are due with your child's registration forms. Once you have reserved your spot for a week you will be charged for that week regardless if your child attends or not.** We must schedule staff, make reservations and order supplies in advance. Thank you for your understanding.

Fieldtrip Eligibility:

If your child makes poor behavior choices resulting in a write up slip, this will make them ineligible for the next fieldtrip. Fieldtrips are a privilege and taking the children off campus requires a certain level of behavior expectations for their safety. If they cannot behave while on campus then we cannot trust them to behave off campus. If there is a group on campus then your child may stay with them while we are on our field trip, otherwise you will need to make separate arrangements for their care for that particular day. We will inform you if there is an available group for them to stay with on campus.

2019 Mooresville Graded School District Before & After School Program Summer Care Registration Form

Name of Child(ren): _____ Grade just completed: _____

{PLEASE PRINT CLEARLY}

My child is a student at: **South** **Park View** **MIS** **RR** **EMIS**

Check the days you wish to register for: Circle **ONE**: FULL TIME PART TIME

		June 17, 2019 Monday	June 24, 2019 Monday
		June 18, 2019 Tuesday	June 25, 2019 Tuesday
	June 12, 2019 Wednesday	June 19, 2019 Wednesday	June 26, 2019 Wednesday
	June 13, 2019 Thursday	June 20, 2019 Thursday	June 27, 2019 Thursday
	June 14, 2019 Friday	June 21, 2019 Friday	June 28, 2019 Friday
CLOSED	July 1, 2019 Monday	July 8, 2019 Monday	July 15, 2019 Monday
CLOSED	July 2, 2019 Tuesday	July 9, 2019 Tuesday	July 16, 2019 Tuesday
CLOSED	July 3, 2019 Wednesday	July 10, 2019 Wednesday	July 17, 2019 Wednesday
CLOSED	July 4, 2019 Thursday	July 11, 2019 Thursday	July 18, 2019 Thursday
CLOSED	July 5, 2019 Friday	July 12, 2019 Friday	July 19, 2019 Friday
		LAST TUITION PAYMENT DUE	
	July 22, 2019 Monday		August 5, 2019 Monday
	July 23, 2019 Tuesday		August 6, 2019 Tuesday
	July 24, 2019 Wednesday		August 7, 2019 Wednesday
	July 25, 2019 Thursday		August 8, 2019 Thursday
	July 26, 2019 Friday		August 9, 2019 Friday
	Last day of Camp	BASP CLOSED	School Starts Back August 6, 2019
	August 12, 2019 Monday		
	August 13, 2019 Tuesday		
	August 14, 2019 Wednesday		
	August 15, 2019 Thursday		
	August 16, 2019 Friday		

★ **June 10 & 11 (BASP Teacher Workday),
July 1-5 (Fourth of July), July 29-August 5 (BASP Teacher Workdays)** ★

WE WILL BE CLOSED THE WEEK OF JULY 1-5, 2019

During Summer Care, attendance has dictated that we combine sites to offset our operational costs. MIS, RR, South and Park View BASP's will combine and will operate at EMIS.

In order to have the Summer Care bills prepared and ready to Email the week of May 14th, the last day to make changes is May 3rd. **All deposits are due with your registration forms in order to hold your slot.**

You may add or withdraw from this Summer care plan up until May 3rd without penalty. Any students added after May 3rd will be charged an additional \$10.00 processing fee.

Summer camp closes at the end of Business July 26; July 29-August 5th are Teacher Work Days

Please submit the completed forms to the Program Director no later than March 29, 2019 at 1438 Coddle Creek Hwy. Mooresville, NC 28115.

I certify that I have read and understand all Summer Care information and registration policies.

Parent/Guardian signature _____ Date: _____

Important Information to Remember for Summer Care

Parents,

The staff and I have a few reminders for you for the summer.

- ✚ **Drop-off and Pick-up** At EMIS 6/12/19-6/28/19 and 7/8/19-7/26/19, please use the **REAR** parking lot (off of **WIGGINS RD.**) and take your child in the cafeteria through the door from the sidewalk outside the cafeteria. The sign in/out table will be located inside these doors for your arrival and departure. I have attached a map marked with the areas we will be using for your convenience.
- ✚ **Dress Code for the Summer** We will follow the School Dress Code for the summer, shorts must meet at the end of finger tips, no spaghetti strap tops or thin strap tank tops for boy or girls. Students must have tennis shoes with them everyday. No flip flops allowed. Students that have River Shoes (water sandals that have a back strap and or clip that keeps them on the foot) may wear these but they must have tennis shoes and socks in their bag to change into for outdoor activities and gym time. We will be doing a lot of messy crafts so please send your child in play clothes that won't hurt to get messed up. Please send a lightweight shirt to put over your child's bathing suit that they can swim in in the event that their sunscreen is not enough protection.
- ✚ **Arrival Time** Arrival time is 9:00 A.M. at the latest on regular days. On fieldtrip days the arrival time will be posted, children must be on campus 45 minutes prior to leave time. There are several days that we will be leaving before 9:00 A.M., please make sure you check the sign in/out table daily. There will not be any staff left on site for child care on fieldtrip days for safety supervision reasons.
- ✚ **Sunscreen** Sunscreen must be supplied from home and a permission slip completed and returned by May 24th to your site director. We will log and transport them to EMIS in advance of the first day of camp.
- ✚ **Map** I have included a map of your summer site for your convenience.
- ✚ **Payments** Payments are due the Friday before the week of care.
- ✚ **Cell Phone #** South, Park View, RR and MIS will have their cell phones at EMIS for the summer.
 - **South** Cell Phone 704-662-2697
 - **Park View** Cell Phone 704-663-9985
 - **RR** Cell Phone 704-345-2699
 - **MIS** Cell Phone 704-477-3803
- ✚ **EMIS Site: Cell Phone #** EMIS has their cell phone as well as EMIS' regular phone number.
 - **EMIS** Regular Number 704-658-2691 option 3 Cell Phone 704-345-2702

Thank you for your attention to these items.

Cindy Karriker

Etaisha Whittenburg, Shaneil Troutman, Missy Foley, Shawna Gallmon and Melissa Ronzo

Parents,

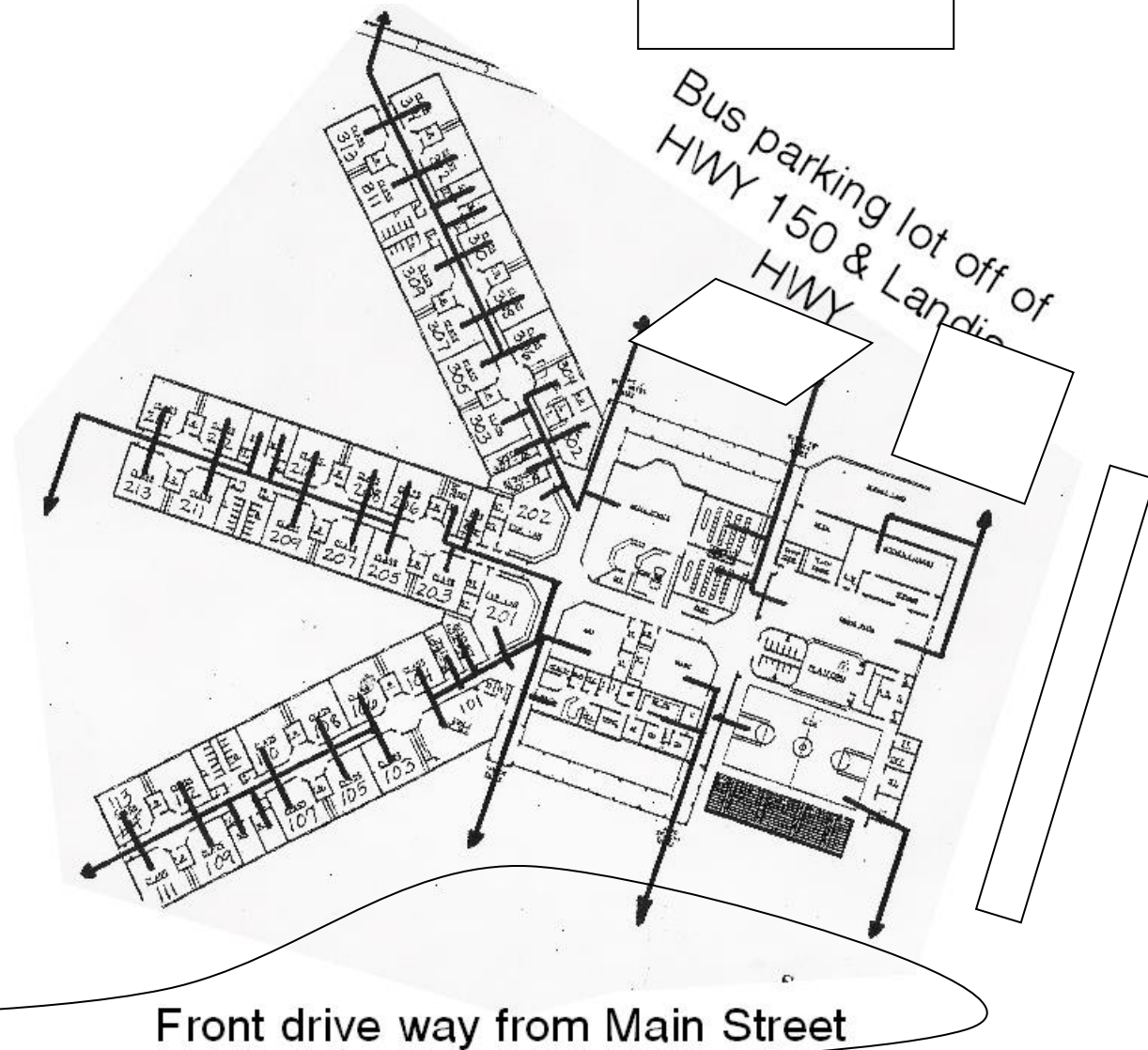
This summer the Summer Care Camp will be held at East Mooresville Intermediate School for K-6th grades. Our base of operation will be out of the Cafeteria. Please enter the building at the first covered double doors as you come down the drive and sign your child in and out at our announcement table every day located in the cafeteria. The BASP office is located at the end of the cafeteria or gym if you need to see a Site Director. There will be a Site Director on duty all day if you should need one.

Thank you for your assistance and we are looking forward to having your child with us this summer.

Cindy Karriker
Program Director

Playground

Playground



STUDENT LAST NAME		FIRST NAME		GRADE (JUST FINISHED)			
				SCHOOL SO PV RR MIS EMIS			
MOORESVILLE GRADED SCHOOL DISTRICT							
FIELD TRIP INFORMATION CARD							
ADDRESS _____							
BIRTHDATE _____				HOME PHONE _____			
My child has my permission to participate in all field trip experiences for the summer. If some major injury should occur during the field trip, or during the school day, I give my permission for the adult in charge to take the necessary steps to provide for the welfare of my child.							
ALLERGIES/MEDICATION _____							
FAMILY DOCTOR _____				SCHOOL INSURANCE: YES _____ NO _____			
Address _____				FAMILY INSURANCE INFORMATION:			
				Ins. Company _____			
Phone Number _____				Ins. Policy Number _____			
IN CASE OF EMERGENCY CONTACT:							
Father: _____				Work Place: _____		Work # _____	
Mother: _____				Work Place: _____		Work # _____	
Name: _____				Home # _____		Work # _____	
Name: _____				Home # _____		Work # _____	
PARENT'S SIGNATURE _____						DATE _____	
<u>PLEASE COMPLETE REVERSE SIDE OF THIS CARD</u>							

Child's Last Name First Name

MOORESVILLE GRADED SCHOOL DISTRICT
OFF-CAMPUS ACTIVITIES PERMISSION AND RELEASE

I hereby give my permission for my child, _____ to participate in all field trip experiences for BASP summer session of 2019.

In the event of any injury or illness to my child, I hereby authorize the adult chaperones and/or employees, agents, or representatives of the Mooresville Graded School District to secure whatever medical treatment is necessary for my child's best interest. I understand that every effort will be made to contact me before any major treatment is provided to my child and that this consent is to prevent a dangerous delay in case an emergency does occur and I cannot be reached.

I certify that my child has the requisite level of capability and responsibility to participate in all field trip experiences for the school year. I understand that there are foreseeable, inherent risks associated with all field trip experiences. I further understand that the Mooresville Graded School District makes no representation whatsoever as to the condition of the swimming facilities nor the certification and qualification of any lifeguards who may be on duty. As such, I, the parent, guardian or custodian, and student (if applicable) fully assume the risk of granting this permission and agree and undertake to save and hold harmless the Mooresville Graded School District and the Mooresville Graded School District Board of Education and its employees, agents, and representatives from any and all claims whatsoever for damage to person and /or property that may result from the above named activity conducted off-campus.

Parent, Guardian, or Custodian's Signature

Date

Summer Care Policy Summary

This is a summary of the policies/changes that apply to Summer Care .

By signing below you are verifying that **you have read the entire Summer Care Packet, understand and agree** to the policies listed within this packet and have had the opportunity to ask questions regarding any item you found unclear. These policies are in addition to standing policies listed in the BASP Handbook.

This summary does not replace the need to thoroughly read the Summer Care Packet. There are details listed in the packet that may not be listed in this summary.

BASP Summer Camp will be closed July 1-5, 2019.

- 1 All forms must be complete **before** your child will be enrolled for the summer program. If there are any incomplete items then your child will be put on the waiting list until you are able to complete the missing information. Your slot will not be secure until all information is complete.
- 2 A \$100.00 non-refundable deposit is due with the application to hold your spot for the summer. This deposit will be applied to your last week of care.
- 3 Payment is due by the Friday before the scheduled week of care.
- 4 **Summer tuition payments** will be accepted on site June 12-July19 OR ONLINE.
- 5 Full time rate is \$160.00 (4-5 days) Part time rate is \$130.00 (1-3 days).
- 6 **All students must arrive on site by 9:00 A.M on regular program days.**
- 7 On **Fieldtrip days your child must be here by the posted arrival time** or by 9:00 whichever is **earlier**.
- 8 You may add, change weeks or withdraw - **IN WRITING**- from this summer care plan up to **May 3, 2019** without penalty.
- 9 Any student **added** after May 3, 2019 will be charged a \$10.00 processing fee.
- 10 **Once you have reserved your spot for any given week you will be charged for that week regardless if your child attends or not.**
- 11 If your child is issued a write up slip they will be ineligible for the next fieldtrip.
- 12 **I have read the dress code and understand my child must have tennis shoes every day.**
- 13 We will be closed June 10-11, July 1-5 and July 29-August 5, 2019 .
- 14 I must supply pump spray on sunscreen for my child and it must be clearly labeled with their name.
- 15 In order for your child to swim at the pool they must have proper swim suits.
- 16 Please make sure you provide us with an email address for updates and billing information.

Signature of Parent/Guardian _____
Date _____

Signature of Director (verifying that you provided question/answer opportunity for this parent/guardian) _____
Date _____

Summer Application Addendum

As of Summer 2017 the Division of Child Development requirements changed and we have new information that needs to be in your child's file. Please complete the following information in its entirety and return with your summer application.

BEFORE & AFTER SCHOOL PROGRAM HEALTH ASSESSMENT

I. Personal Data

CHILD'S NAME _____

AGE _____ BIRTHDAY _____

PARENT (S)/GUARDIAN _____ PHONE _____

II. HEALTH AND BEHAVIORAL HISTORY

For any child with health care needs such as allergies, asthma, or other chronic conditions that require specialized health services, a medical action plan shall be attached to this application. The medical action plan must be completed by the child's parent and or health care professional. Is there a medical action plan needed for this child? (please request the forms from our staff or print them from our web page under Enrollment, Registration and Medical Forms)

Circle one: **Yes** **No**

Briefly list any **allergies**: (food, insect stings, medicines, pollens, etc.)

and the symptom and type of response required for **allergic reactions**:

List any conditions or health problems for which the child currently receives medical care, symptoms of and type of response for these health care needs or concerns.

List any types of medication taken for health care needs:

Diet Restrictions or preferences: (A diet order must be on file with our Child Nutrition service – please request more information from our staff)

Please share any other information that has a direct bearing on assuring safe medical treatment for your child

Child's Health Care Provider:

Doctor/agency _____ Phone _____

Parent signature _____ Date _____

Child's Full Given Name: _____ Date of Birth: _____

Address: _____ Zip Code: _____ Age: _____ Grade: _____

RELEASE INFORMATION:

_____ **NO ONE** except the parents/guardians are authorized to pick up the child from MGSD BASP

_____ **NAMES OF OTHER AUTHORIZED PERSONS WHO MAY PICK UP THE CHILD:**

1 _____ Relationship: _____ Phone Number: _____

Address: _____

2 _____ Relationship: _____ Phone Number: _____

Address: _____

3 _____ Relationship: _____ Phone Number: _____

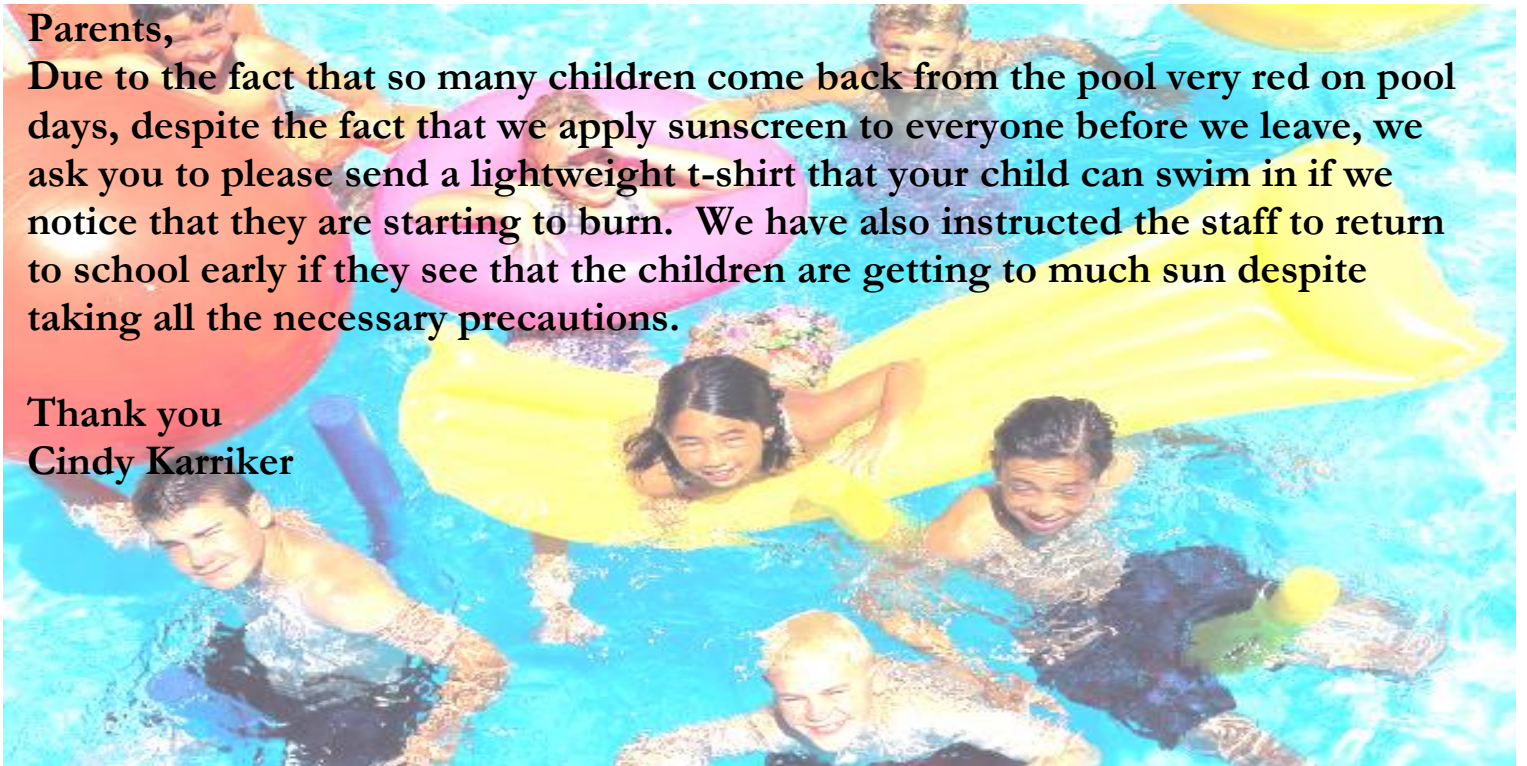
Address: _____

DATE: _____ Parent Signature _____

Parents,

Due to the fact that so many children come back from the pool very red on pool days, despite the fact that we apply sunscreen to everyone before we leave, we ask you to please send a lightweight t-shirt that your child can swim in if we notice that they are starting to burn. We have also instructed the staff to return to school early if they see that the children are getting to much sun despite taking all the necessary precautions.

**Thank you
Cindy Karriker**



Medication Administration Permission for Over-the-Counter Topical Medications and Fluoridated Toothpaste

Parent/guardian must authorize staff to apply over-the-counter, topical ointments, topical teething ointment or gel, insect repellents, lotions, creams, powders and fluoridated toothpaste. Sunscreen and baby lotion are examples. Only accept items in their original containers and clearly labeled with the child's name. Keep insect repellents in locked storage and all other items out of reach of children when not in use.

Child's Name _____

Permission is given to apply the following (name/type) _____

Amount _____ Expiration date, if applicable _____

Fluoridated toothpaste should be a rice sized smear for children under 3 and pea sized for children 3 and over.

Permission may be given for up to 12 months. Permission valid from ____/____/____ to ____/____/____

Where to apply the ointment, repellent, lotion, cream, powder or fluoridated toothpaste:

- all exposed skin diaper area other (specify) _____
- face only toothbrush

When to apply the ointment, repellent, lotion, cream, or powder:

- before going outside after each diaper change other/as needed for (specify) _____
- after a bowel movement before tooth brushing

Describe how to apply the ointment, repellent, lotion, cream, or powder. _____

I give permission to my child care provider to apply the medication listed above as instructed:

Parent/guardian name

Parent/guardian signature

Date

Medication Administration Permission for Over-the-Counter Topical Medications and Fluoridated Toothpaste

Parent/guardian must authorize staff to apply over-the-counter, topical ointments, topical teething ointment or gel, insect repellents, lotions, creams, powders and fluoridated toothpaste. Sunscreen and baby lotion are examples. Only accept items in their original containers and clearly labeled with the child's name. Keep insect repellents in locked storage and all other items out of reach of children when not in use.

Child's Name _____

Permission is given to apply the following (name/type) _____

Amount _____ Expiration date, if applicable _____

Fluoridated toothpaste should be a rice sized smear for children under 3 and pea sized for children 3 and over.

Permission may be given for up to 12 months. Permission valid from ____/____/____ to ____/____/____

Where to apply the ointment, repellent, lotion, cream, powder or fluoridated toothpaste:

- all exposed skin diaper area other (specify) _____
- face only toothbrush

When to apply the ointment, repellent, lotion, cream, or powder:

- before going outside after each diaper change other/as needed for (specify) _____
- after a bowel movement before tooth brushing

Describe how to apply the ointment, repellent, lotion, cream, or powder. _____

I give permission to my child care provider to apply the medication listed above as instructed:

Parent/guardian name

Parent/guardian signature

Date



PLEASE REMEMBER that payments are due the FRIDAY BEFORE the week of care and that we will not allow any charging this summer. For security we are asking that you make your payment on FRIDAY MORNING so that we do not have any money on site during the weekend.

What NOT to bring from home:

Hand held digital devices,
Movies, Toys, unhealthy snacks

Signing in and Signing out

Sign in

- @ Please note that we do not open before 6:30 A.M. by OUR CLOCK.
- @ Please allow yourself enough time in the morning to drop your child off because you must walk your child in and sign them in every day
- @ There will be a Location Chart to help you identify where to take your child each morning
- @ Please speak to the staff member on duty each morning so they know your child has arrived.

Sign Out

- @ Please note that we close at 6:00 P.M. and late fees will be charged at 6:01 P.M. by OUR CLOCK.
- @ Please speak to the staff member on duty each evening so they know your child is leaving.
- @ Please check the Sign Out table for receipts and notices.

Drop-off and Pick-up At EMIS please use the back drive way and take your child into the cafeteria from the sidewalk beside the cafeteria as you approach the building. The sign in/out table will be located inside the door for your arrival and departure.

CONTACT NUMBERS:

South Elementary BASP
Cell: 704-662-2697

Park View Elementary BASP
Cell: 704-663-9985

EMIS BASP
Cell: 704-345-2702
Office: 704-658-2691 opt. 3

MIS BASP Phone
Cell: 704-477-3803
Business Office: 704-658-2681

RR BASP Phone
Cell: 704-345-2699

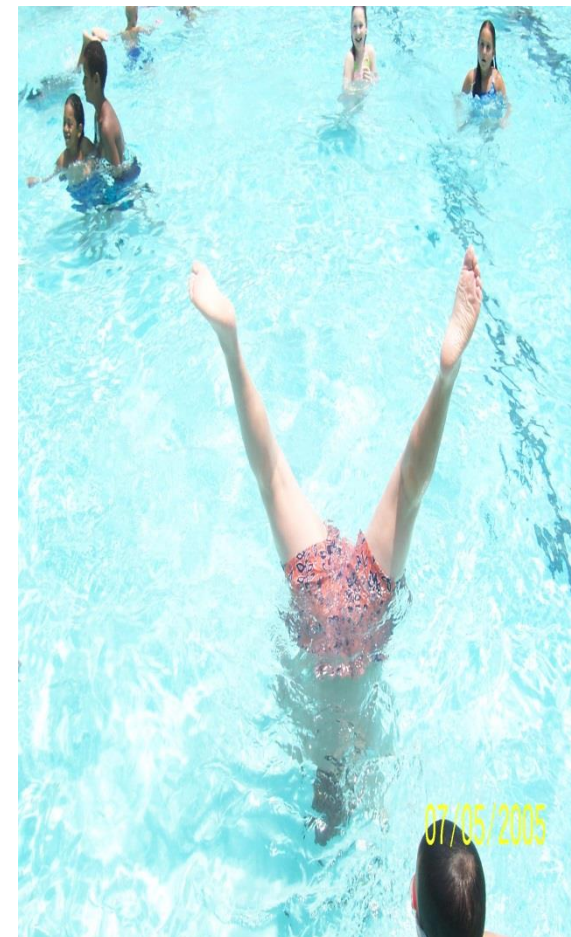
Dress Code:

- @ Tennis Shoes every day.
- @ No shoulder straps less than 3 fingers wide
- @ Shorts/Skirts no shorter than the tips of your fingers with your arm at your side.
- @ Skirts – wear shorts underneath.
- @ Wear Bathing suit under clothes to school on swim day – bring a change of clothes for after we get back, bring water shoes to change into.

Sunscreen Pump Spray Sunscreen must be supplied from home and a permission slip completed and returned by May 24th.



BASP Summer Instructions & Phone #'s



QUESTIONS OR NOTES

Parents we use a program call REMIND to send out Information updates and reminders for Field Trips and Travel information. If you would like to get these messages please sign up by Texting Class Code @748db7 to: 81010. This is the best way to find out when we leave campus and our return times back to campus so you do not have to sit and wait if we are running behind. You may opt out any time by texting @LEAVE @748db7
