



Athens Intermediate School

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Dear Families,

Welcome to the Athens Intermediate School Latchkey Program for the 2022-2023 school year. We hope the time your child spends with us will be rewarding, productive, and a relaxed extension of the formal school experience. Our objective is to enhance your child's physical, social, educational, and psychological growth. Because we feel that parents share in this goal, we look forward to working closely with everyone.

Please familiarize yourself with the information in this enrollment packet. The Latchkey Program is an expansion of the typical school day with a focus on creativity and functioning within a social environment. Our program is staffed to care for fourth and fifth grade students. There will be time for homework, physical activity, social interaction, and creative projects.

Please return the application form as soon as possible. We have limited openings, so it will be on a first come, first serve basis.

Thank you for your interest in our after school program. Please feel free to contact us if you have any questions. We welcome your comments and look forward to working with your child and family in the upcoming year.

Sincerely,

Cindy Davis,
Principal

LATCHKEY PROGRAM POLICY AND PROCEDURE MANUAL

POLICIES:

The program is equipped and staffed to care for fourth and fifth grade children. The program is available on a full-time registration basis. Drop-in service for students who are not registered will not be available.

HOURS OF OPERATION:

The Latchkey Program will begin on Wednesday, August 10, 2022, and will end on Tuesday, May 23, 2023. For Latchkey, students will be received immediately after school dismisses and are to be picked up by 5:00 p.m. All children must be picked up by closing time. Failure to do so will result in a fine and/or termination of services. There is a fine of \$1.00 per child for every minute past 5:00 p.m.

Nonpayment of late fees could result in termination of services. **If you are repeatedly late, your child will be removed from participation in the program.**

HEALTH AND SAFETY:

If your child becomes ill or injured while attending our program, he/she will be isolated and you will be notified to pick the child up immediately. **All information concerning the child's personal and medical information should be kept updated and current.** Any changes or updated information should be reported to the Latchkey Director.

The Latchkey does not offer accident insurance on the children enrolled in the program. An additional insurance policy is available through an independent company and detailed information regarding this policy can be obtained through the school office. A signed release statement must be on file for each child.

Children may not leave school premises until they have been released to a responsible adult. Your child will be released only to those authorized on the child's registration form. In an emergency, *written* notification for your child to leave with someone else should be given to the Latchkey Director.

All children will be expected to follow the dress code established by the Athens City Board of Education.

EMERGENCY PLAN / CANCELLATION OF ACTIVITIES:

Drills during the Latchkey will be conducted periodically. An emergency plan of action has been developed and will be followed in the event of a tornado warning, storm warning, fire, etc. Should the child need to be checked out during one of the described conditions, it is required that the child be checked out directly with the supervising personnel.

The Latchkey will follow the schedule of the school. **If schools are closed due to holidays or inclement weather, the Latchkey will not offer services and no fee will be charged for these days.** Additionally, if schools are closed due to inclement weather, your child will be sent home by the method you have indicated on the Emergency Transportation Plan.

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DISCIPLINE:

Discipline of children shall be consistent and fair. All limits and rules are expected to be followed. No corporal punishment will be allowed. Procedures will be taught and it is our expectation that students will follow procedures to ensure a safe place where everyone is treated with kindness, courtesy, and respect. Students who refuse to follow procedures will be dismissed from the program.

SNACKS:

Snacks will be provided daily. If your child has any “food related” allergies, this should be on file with the Latchkey Director.

INCOME TAX INFORMATION:

Please retain all receipts. The Athens City Board of Education Federal Tax Identification number is **63-6000808**.

TUITION:

Tuition is due on **Monday** of each week. A late fee of \$5.00 per family will be charged if payment is not received on Monday. Children will be dismissed from the program after two weeks of non-payment of fees. Checks should be made payable to the school. Post-dated checks cannot be accepted. It is the responsibility of the parent to provide exact payment when paying with cash. All checks should have the following information written/printed on them:

- Student’s name
- Your name, address, and phone number or driver’s license number
- The week for which you are paying

All fees are payable as scheduled regardless of attendance. Exemptions from payment will be given only for death of an immediate family member or illness involving one week or more in duration. Students will be exempt from charges incurred during these times only if they are also absent from the regular school day.

RETURNED CHECKS ARE TURNED OVER TO A COLLECTION SERVICE.

The payment schedule is as follows:

	5 DAYS	4 DAYS	3 DAYS	2 DAYS
1 STUDENT	\$40.00	\$32.00	\$24.00	\$16.00
SIBLINGS	\$30.00	\$24.00	\$18.00	\$12.00

There is a \$15 registration fee due with this application.

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WHATEVER IT TAKES.
Every Child. Every Day.

FAX (256) 206-8224

2022-2023 LATCHKEY REGISTRATION FORM

Student's Name:

Grade:

Teacher:

Date of Birth:

Mother's Name:		Employer:	
Phone #:		Work #:	
Can you receive text messages? Yes No			

Father's Name:		Employer:	
Phone #:		Work #:	
Can you receive text messages? Yes No			

Emergency Information (2 contacts other than yourself are required): If my child is ill or has an emergency and I cannot be reached, please call and release my child to:		
Name	Phone #	Relationship
1.		
2.		

Physician's Name

Phone #:

Medical Insurance Carrier

Policy #:

PARENT MUST CHECK ONE STATEMENT BELOW:

In the event of an emergency, when a parent or guardian is unavailable, I authorize school personnel to make arrangements for my child to receive medical/hospital care including necessary transportation, in accordance with their best judgment. I authorize the physician named above to undertake such care and treatment as is considered necessary. In the event said physician is unavailable, I authorize care and treatment to be performed by a licensed physician or surgeon. I agree to pay all costs as a result.

I do not choose the above statement and desire the following action in the event of an emergency:

Parent Signature:

Date:

**LATCHKEY PROGRAM
GENERAL HEALTH INFORMATION 2022-2023**

STUDENT'S FULL NAME:	
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Please check all that apply to this student:

VISION:	<input type="checkbox"/> Wears glasses	<input type="checkbox"/> Wears contacts	How often?
HEARING:	<input type="checkbox"/> Has a hearing problem	<input type="checkbox"/> Has tubes in ears	<input type="checkbox"/> Has a hearing aid

- Asthma ADHD Epilepsy Fainting spells
 Heart condition Migraines Allergies Weak stomach

Other:

List medications below:	
Medication	Current dosage

*Reasonable effort will be made to administer prescription medications until the nurse leaves for the day. However, you are encouraged to ask your physician to prescribe dosage intervals that fall outside of Latchkey program hours. The school nurse is on campus until 3:00 p.m. and can administer medicine until then. The Latchkey program does not have access to medication stored in the clinic.

Safety is a priority. No student enrolled in the Latchkey will be released from the program without a parent/guardian signature or that of one of the individuals named below.

Name	Phone #	Relationship
1.		
2.		
3.		

IS THERE ANYONE WHO SHOULD NOT PICK UP YOUR CHILD? IF YES, PLEASE LIST THE NAMES:

Parent Signature:

Date:

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**LATCHKEY PROGRAM 2022-2023
ACKNOWLEDGMENT OF RECEIPT**

PLEASE CHECK THE APPROPRIATE BOXES BELOW.

DAYS MY STUDENT WILL ATTEND (2 to 5 days per week – same day each week):

Monday

Tuesday

Wednesday

Thursday

Friday

I have received a copy of the Athens Intermediate School Latchkey Program policies and agree to comply with all rules and regulations. I understand that the Athens Intermediate School Latchkey Program does not have accident/medical insurance on my child and I assume full responsibility for any and all medical expenses incurred due to injury while in the program.

I understand that all tuition and fees for the Athens Intermediate School Latchkey Program are due on Monday of each week and that a late fee of \$5.00 will be added for any late payments. I also understand that once I pay for designated days at the beginning of the week, all tuition and fees are to be kept by AIS regardless of attendance.

Student's Name:

Parent/Guardian Signature:

Date: