



science | technology | reading | engineering | arts | math

## **EdSTREAM Extended Day 2023-2024**

### **Springville Elementary School**

**75 Wilson Street | Springville, AL 35146**

**Jess Nelson, SES EdSTREAM Site Director | Email: [michael.nelson@sccboe.org](mailto:michael.nelson@sccboe.org) | Phone: (205) 467-6550**

**Website:**

**| Facebook: SES EdSTREAM**

### **Program Purpose**

Only current Springville students in grades K-5 are eligible for participation in SES EdSTREAM. The program is intended to be a high-quality enrichment experience, providing opportunities for growth and development of children in grades K-5. We will provide a daily snack, assistance with homework, stations with math, science, and art activities, and students will participate in other various fun activities on campus. The purpose of these experiences is to invite creativity, build curiosity, and encourage learning, all while having fun.

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### **Extended Day Hours of Operation**

**3:00 PM - 6:00 PM**

The program runs from August 8, 2023 – May 22, 2024. When there is a threat of inclement weather, we will evaluate the situation and plan with the safety of our students in mind. If a closure is warranted, we will notify parents ahead of time. When this happens, look for updates on the SES website, SES Facebook page and SES EdSTREAM Facebook page.

The program is in the SES lunchroom.

You will enter the lunchroom from the Pine Street parking lot for pick up each day. You will need your driver's license to pick up your child if you are new to our program.

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## Rates and Payment Procedures

**Registration Fee:** \$35 per child (This is non-refundable.)

**After School Care Weekly Fee:** \$60 per child (We do not offer daily rates or prorated rates. We do not allow daily drop-ins.) Enrolling in this program requires a commitment of payment for each week that you attend. Attending only one day is still attending for that week.

All payments are due each week. **Checks should be made payable to SES EdStream.** Please include your child's name in the memo section on each check. Payments must be given to the site director. Parents will be contacted if a check is returned from the bank. There is a \$30.00 service charge for all returned checks. All future payments will result in money order or cashier's check ONLY. If an account becomes more than two weeks late, the child will not be allowed to stay in the program until the balance is paid. A child may be removed from the program if delinquent payments continue to occur.

We do not accept cash. We do accept credit card and debit card payments.

**Late Pick Up Fee:** We charge \$1.00 a minute after 6:00 PM and \$5.00 a minute after 6:05 PM

**Our program is funded 100% by the weekly fees. We DO NOT receive any federal funding.**

## Discipline Policy

Our staff will implement our discipline policy fairly, consistently and in a developmentally appropriate manner. Our staff will not use any form of corporal punishment.

The following procedures will be used for refocusing and redirecting a child's behavior:

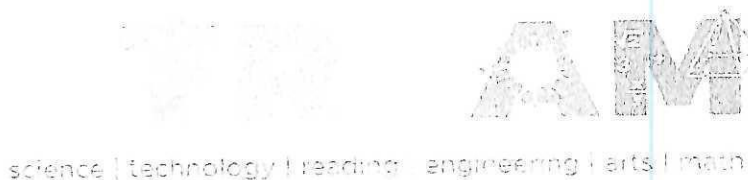
1. If a student has inappropriate behavior, a member of the staff will meet with him/her. A clear explanation will be given of what is expected.
2. If behavior does not change, the student will be placed in a "time out" for 10 minutes.
3. If the student fails to respond, he/she will be written up. This will require a parent conference with the site director. The student will be dismissed from the program if written up three times.

### Students Are Expected To:

1. Follow the SES EdSTREAM rules.
2. Follow the SES handbook.
3. Remain with the staff in designated SES EdSTREAM areas.
4. Show respect for others, staff, and equipment.

### Parents Are Expected To:

1. Direct all concerns to the site director.
2. Make all payments on time to the site director or assistant director.
3. Pick up your child if notified of illness or disciplinary issues.
4. Pick up your child by 6:00 P.M. each day.



***Our program reserves the right to remove any child for inappropriate behavior.***

***The program will maintain a 15:1 student/staff ratio.***

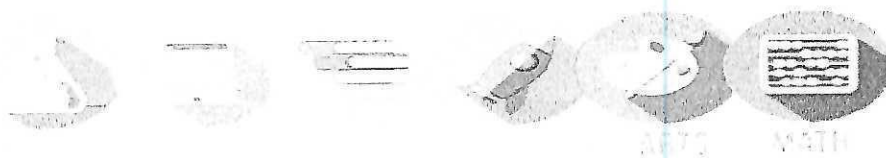
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**I have read and understand this registration form.**

**I also understand that participation in EdSTREAM Extended Day is a privilege.**

- **I give permission for my child to view PG movies.**
- **I give permission for my child to be photographed or videoed and to be published on the SES website, SES Facebook page and SES EdSTREAM Facebook page.**
- **I understand that I am required to pay tuition each week.**
- **I understand that my child can be dismissed from the program if I am two weeks behind on my payments.**
- **I understand that my child can be dismissed from the program if written up three times for inappropriate behavior.**

**Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_**



## Medical Information

Doctor's Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_

Allergies: \_\_\_\_\_

Do we have permission to seek medical treatment if unable to reach parents  
or emergency contacts?

(Circle one)      YES      NO

## Approved Pick-Up List & Emergency Contacts

Contact #1

Contact #2

Contact #3

Name: \_\_\_\_\_ Name: \_\_\_\_\_ Name: \_\_\_\_\_

Relation: \_\_\_\_\_ Relation: \_\_\_\_\_ Relation: \_\_\_\_\_

Phone (H): (\_\_\_\_) \_\_\_\_\_ Phone (H): (\_\_\_\_) \_\_\_\_\_ Phone (H): (\_\_\_\_) \_\_\_\_\_

Phone (C): (\_\_\_\_) \_\_\_\_\_ Phone (C): (\_\_\_\_) \_\_\_\_\_ Phone (C): (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

## Contact Information

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Teacher: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_  
Street City State ZIP

## Parent Information

Mother's Information	Father's Information
Name: _____ _____	Name: _____ _____
Phone (H): (____) _____	Phone (H): (____) _____
Phone (W): (____) _____	Phone (W): (____) _____
Phone (C): (____) _____	Phone (C): (____) _____
Employer: _____	Employer: _____
Driver's License #: _____	Driver's License #: _____
Email Address: (please print) _____	Email Address: (please print) _____

Child Lives With: \_\_\_\_\_