

**OLDHAM COUNTY BOARD OF EDUCATION  
ADMINISTRATIVE REGULATION FORM**

**YOUTH ENRICHMENT FORM**

**9007.01F**

SCHOOL YEAR: \_\_\_\_\_ ENTRY DATE: \_\_\_\_\_

REGISTRATION AND AGREEMENT FOR: \_\_\_\_\_  
(SCHOOL)

\*The student may enroll only in the Youth Enrichment Program at the school that he/she currently attends or will be attending in the upcoming school year.

**GENERAL INFORMATION**

STUDENT: \_\_\_\_\_ GENDER: \_\_\_\_\_ GRADE: \_\_\_\_\_ DOB: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

ADDRESS WHERE CHILD RESIDES: \_\_\_\_\_

PHONE NUMBER(S) WHERE PARENT CAN BE REACHED IN THE EVENT OF AN EMERGENCY:

Mother/Guardian Phone#: \_\_\_\_\_  
Cell/Work Last 4 (four) digits of parent's SSN

Mother/Guardian Email(s): \_\_\_\_\_

Father/Guardian Phone#: \_\_\_\_\_  
Cell/Work Last 4 (four) digits of parent's SSN

Father/Guardian Email(s): \_\_\_\_\_

Name, Relationship & Phone #'s of Minimum of Three (3) Persons Other Than Parents to Whom Child May be Released:

Name	Relationship to Student	Phone Number

- My Child Will Be Attending the Youth Enrichment Program: FULL-TIME (3 or more days per week)
- My Child Will Be Attending the Youth Enrichment Program: PART-TIME (1 or 2 days per week)
- My Child Will Be Attending the EARLY BIRD Program (if offered at this location)

**Check days of attendance:**  Monday  Tuesday  Wednesday  Thursday  Friday

I understand that the enrollment and emergency information supplied to the school as a part of school registration will be copied by the school and attached to this agreement and is incorporated herein by reference. I agree to advise school and youth enrichment program officials immediately in the event of any changes in that information.

\_\_\_\_\_  
*Parent Initials*

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**NOTE BELOW ANY MEDICAL ISSUES/ALL ALLERGIES, REQUIRED ACCOMMODATIONS, OR CUSTODIAL ISSUES:**

Custodial Arrangements (Court Documents Required):

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**Insurance required:**

Insurance Company: \_\_\_\_\_ Policy No. \_\_\_\_\_ Group No. \_\_\_\_\_

Pediatrician: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_

Allergies:  Yes     No    List allergies below:

\_\_\_\_\_  
\_\_\_\_\_

Accommodations needed, if any:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

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**ALL FEES ARE THE RESPONSIBILITY OF THE PARENT/GUARDIAN SIGNING THIS CONTRACT**

I understand that the following fees are applicable to my child's participation in the enrichment program. I further understand that failure to pay fees on time may result in immediate termination of this agreement by the school. I also understand that the school may refuse admittance to any child who has an outstanding balance at any other Oldham County School youth enrichment program.

**These fees are due and payable even if my child misses due to illness, death in the family, or other reasons.** (State license requirements demand that programs are staffed based on the number of children expected to attend).

**ANNUAL ADMINISTRATIVE FEE:** \$40 per child (**Non-Refundable**)

**AFTER-SCHOOL CARE FEES DURING THE SCHOOL YEAR – 2:20 p.m.-6:00 p.m.**

**Full-time:** (3 or more days per week):

\$85/week for 1st child enrolled

\$60/week for each additional child of parent/guardian signing this contract

**Part-time:** (1 or 2 days per week):

\$30 per day for 1st child enrolled

\$25 per day for each additional child of parent/guardian signing this contract

**Early Bird:** (before school):

\$2 per day for each child (*not all schools offer Early Bird services. Hours may vary.*)

Regular full-time after-school contract fees will be adjusted to the part-time daily rate if school is closed (weather or emergency closing) for more than three days in one week and the child does not attend the YEP on those days.

**See below** - "*Fees for Attendance on Days When School is Not in Session*" - for fee information for children attending the YEP when school is closed due to weather or an emergency.

**FEES FOR ATTENDANCE ON DAYS WHEN SCHOOL IS NOT IN SESSION.**

**Full-time:** (3 or more days per week):

\$140/week for 1st child enrolled.

\$100/week each additional child enrolled.

**Part-time:** (1 or 2 days per week):

\$50/day for each child enrolled.

\$40/day each additional child enrolled.

**Emergency Order:** (Operating under reduced ratio guidelines)

Full-time: \$150.00/week per child

Part-time: \$50.00/week per child

**LATE PICK-UP FEES**

**Children must be picked up no later than 6:00 p.m. each day.**

I understand that I will be assessed a late pick-up fee of \$1.00 per child for each minute after 6:00 p.m. that I am late in picking up my child from the Youth Enrichment Program. Late pick-up fees are due at the time of pickup. This agreement is subject to termination by the School Principal; the child will not be permitted to attend the Youth Enrichment Program if the parent is repeatedly late in picking up the child.

**FEE PAYMENT POLICY:**

Payment of program fees are due by 6:00 p.m. on **Friday** of the week *preceding* each week of attendance. I understand that if the fee is not paid by 6:00 p.m. on the following Tuesday, I will be assessed a **\$5.00** late payment fee for that week. Failure to pay attendance or late fees on time may result in immediate termination of the agreement by the Principal and the child not being permitted to attend the Youth Enrichment Program.

\_\_\_\_\_  
*Parent Initials*

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**CANCELLATION DUE TO INCLEMENT WEATHER OR SCHEDULED HOLIDAYS**

Parents/guardians are responsible for the payment of regular fees for all scheduled holidays and snow day school cancellations unless the Youth Enrichment Program is closed on three days during the same week, or school is closed for three days during the same week and the child does not attend the YEP, in which cases the daily rates will apply.

If a student attends on a snow day(s) an additional \$40 per day per child will be assessed in addition to the regular weekly after school care fee. *Note: The first child's weekly rate is capped at \$110.*

***See "Fees for Attendance on Days When School is Not in Session"***

**Youth Enrichment Programs follow the same non-work day closure schedule as the Oldham County Board of Education.**

**FAMILY VACATIONS**

Parents/guardians whose children do not attend the YEP during any one or all of the following weeks of the year will not be responsible for payment for the week(s) that their children are not in attendance if the parent **notifies the Director in writing, two- weeks in advance** that the child will not be attending:

- October Break
- Christmas Break
- Spring Break
- Thanksgiving week

To be released from responsibility for payment during any of the above breaks, the child may not attend any days in that break.

**TERMINATION**

Parents must provide two-week's written notice to the Director before removing their child from the program permanently. If a parent does not provide a two-week's notice, they will be charged the regular rate for the two weeks whether the child attends the YEP or not.

**RULES**

All policies and procedures outlined in the School's Parent Handbook apply to the Youth Enrichment Program. I understand that my child and I must follow all the same rules, policies and regulations that we are normally required to follow during school. YEP officials may provide additional rules pertaining to specifics within the Enrichment Program (*see Program Handbook*)

**VERIFICATION AND RELEASE**

I verify that I have reviewed and understand the terms of this agreement with the above-referenced school. I agree to abide by the terms of this agreement in full. As parent/guardian of the child listed above, I verify that the information on this entire contract is current and that I will immediately inform the school of any changes in this information. I authorize any school personnel to take reasonable emergency (including calling 911) measures on behalf of my child and agree to hold them harmless for any treatment rendered.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**ALL FEES ARE THE RESPONSIBILITY OF THE PARENT/GUARDIAN SIGNING THIS CONTRACT**