# How to Register?

At the end of this call:

- 1. Visit www.alphabest.org/northshoreil
- 2. Click "Enroll Now for 2024-2025 School Year" at the top of the page



# Welcome to Wonder, North Shore School District 112 Families

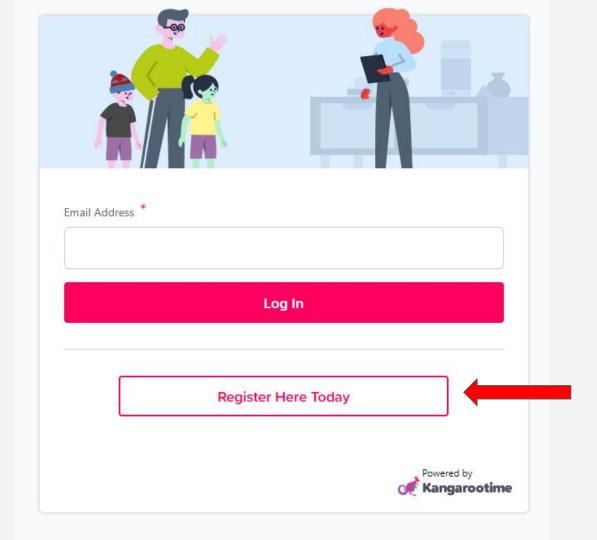
2024-2025 School Year Registration is Open!

Summer Excursions 2024 Registration is Open!

Enroll Now for Summer Excursions 2024



Enroll Now for 2024-2025 School Year



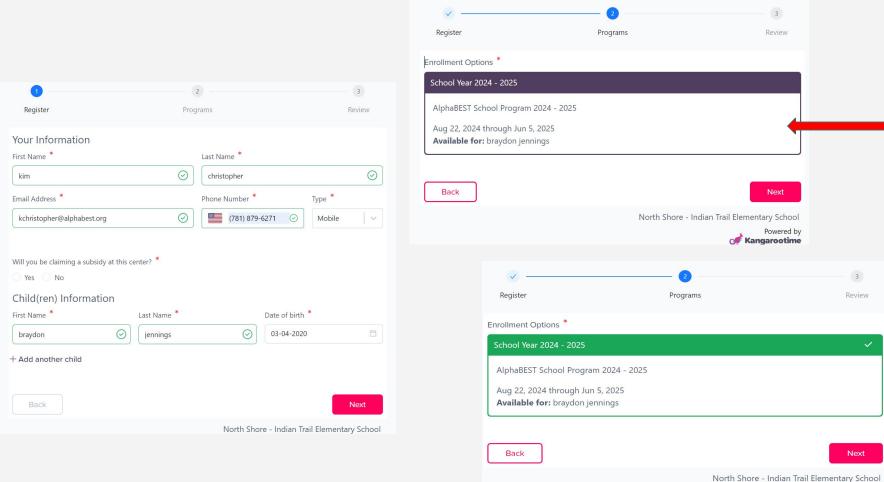
AB

ocation		
Select		~
Submit		

## Select the center you would like to enroll your child in

#### Location

Select	~	
North Shore - Braeside Elementary School		
North Shore - Indian Trail Elementary School		
North Shore - Oak Terrace Elementary School		ру
North Shore - Ravinia Elementary School		e
North Shore - Red Oak Elementary School		
North Shore - Sherwood Elementary School		
North Shore - Wayne Thomas Elementary School		



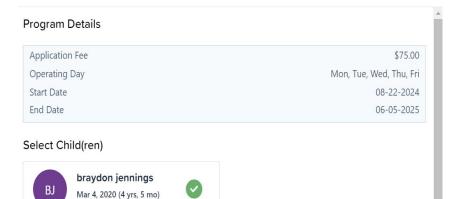
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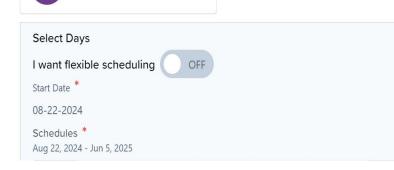
<ul> <li>————————————————————————————————————</li></ul>	2	3
Register	Programs	Review
rograms *		
chool Year 2024 - 2025		
electing multiple programs? Y	ou'll only pay the highest fixed fee from the se	elected programs.
After School Program 2024 -	2025	Flexible Scheduling
After School Tuition 1 Day \$7	79 2 Days \$158 3 Days \$236 4 Days \$315 5 Da	ys \$333
Aug 22, 2024 through Jun 5, <b>Available For:</b> braydon jenn <b>Application Fee:</b> \$75.00		
Before and After - After Progi	ram 2024 - 2025	
	efore and After - Morning Program" Before and rs \$445 4 Days \$595 5 Days \$630	d After School Tuition 1
Aug 22, 2024 through Jun 5, Available For: braydon jenn Application Fee: \$75.00		
Before and After - Morning Pr	rogram 2024 - 2025	
**Must be combined with Bef \$150 2 Days \$300 3 Days \$44	fore and After - After Program" Before and Afte 15 4 Days \$595 5 Days \$630	er School Tuition 1 Day
Aug 22, 2024 through Jun 5, 2	2025	
Available For: braydon jenni	ngs	
Application Fee: \$75.00		
Before School Program 2024 -	- 2025	Flexible Scheduling
Before School Tuition 1 Day \$	\$78 2 Days \$156 3 Days \$233 4 Days \$310 5 Da	ys \$328
Aug 22, 2024 through Jun 5, 2	2025	
Available For: braydon jenni		
Application Fee: \$75.00		
Application rec: \$75.66		
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Back		Next

North Shore - Indian Trail Elementary School

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## After School Program 2024 - 2025



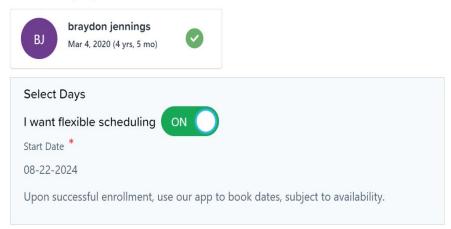


## After School Program 2024 - 2025

## Program Details

Application Fee	\$75.00
Operating Day	Mon, Tue, Wed, Thu, Fri
Start Date	08-22-2024
End Date	06-05-2025

## Select Child(ren)



<ul> <li>—</li> </ul>		_ 🗸	3
Register		Programs	Review
Your Information			
First Name		Last Name	
kim		christopher	
Email Address		Phone Number Type	
kchristopher@alphabest.	org	(781) 879-6271 Mol	bile
Child(ren) & Progr	am		
First Name	Last Name	Date of birth	
braydon	jennings	2020-03-04	
Program 1	Start Date	Schedules	
After School Program 2024 - 2025	2024-08-22	Flexible schedule, subject to availabilit	y
Back		Confirm and	I Continue
		North Shore - Indian Trail Elen	
			Powered by Cangarootime



First Name *	Middle Name		Last Name *
TestAccount			Norman
Gender *	Date of Birth *	Grade *	
Select 🗸 🗸 🗸	02-02-2016	Select	~
Please choose your child's hor cases that we use busing. Select	ne site (not always the site th	nat they are registe	ring for). This is used by AlphaBEST in
Medical Information			
Doctor Name	Doctor's Address		Doctor's Phone
List any past illnesses and the approximate dates of the illne (i.e. chicken pox, asthma, rheu fever, hay fever, diabetes, etc.)	matic here and their use	those devices	* Does your child have any fears, problems, or needs? If yes, explain.
Yes No	requiring accommodation?	(Allergies, Medical	Conditions, Medications, Restrictions) *
s your child immunized?			
Back			Next
			Portola Valley-Corte Madera
			Powered



## Primary Contact

This person has full authority and permission over the account including drop off/pick up, and will be contacted first for billing and emergency purposes

Primary Contacts				
First Name *	Last Name *			
Test	Norman			
Address				
Address *			Ste, Apt	
City *		State *		
City				
		Select		
Country		Zip Code	*	
United States	~			
Phone Number *			Type *	
(336) 888-8888			Mobile	
+ Add another phone				
Email *				
bnorman+test@alphabest.org				
TestAccount Norman Relationship *				
Select	~	Child	lives with this person	
Employment Informatio	on			
Is this person employed? *				
🔾 Yes 🔘 No				
	Re	move		



+ Add another primary contact

Additional Cont	tact		
This is an additional perso	on authorized to pick up th	ne child(ren) and/or be c	ontacted in an emergency.
Additional Contact	c		
First Name *	Last Name *		
First Name			
Address			
Address *		Ste	e, Apt
City *		State *	
		Select	
Country		Zip Code *	
United States			
Phone Number *	Type *	Email	
· · · - · - · · · · · · · · · · · · · ·	Select 🛛 🗸 🗸		
TestAccount Norman Relationship *			
Select	~		
Emergency contact			
Permission to pick up			
Employment Inform	mation		
Is this person employed? *			
Yes No			





#### (!) IMPORTANT: Your enrollment is not yet complete

You have until 04-25-2024 9:46 am to complete the enrollment form, or your enrollment request will expire.

#### Terms and Conditions

#### Handbook Acknowledgement

I have read and agree to the AlphaBEST Family Handbook.

#### \*Spanish Family Handbook\*

#### **Notification of Parent Rights**

I understand the linked form must be filled out and returned to the site on the first day of attendance.

#### Hospital Transportation Acknowledgement

I understand that every effort will be made to contact primary and secondary account holders in the event of an emergency requiring medical attention for my child. However, if someone cannot be reached, AlphaBEST Education Inc. is authorized to transport the child to the nearest hospital or medical facility and to secure the child the necessary medical treatment. Employees in the extended day program are trained in the basics of First Aid/CPR, and they are authorized to give the child First Aid and/or CPR if necessary.

#### Discounts

AlphaBEST offers several discount options for families. Please apply through our website at www.alphabest.org/discounts after your application has been approved. You will also receive an email with the application link upon approval.

#### Fee Agreement

I understand that fees may change. By continuing my child's enrollment, I agree to pay any adjusted fees.

#### **Flexible Scheduling Guidelines**

Flexible Scheduling (also known as casual booking) offers convenience for families needing occasional care. Please keep the following guidelines in mind:

- Advance Booking: Secure your child's spot by scheduling Flexible Scheduling sessions at least 5
  days in advance through the KT Connect app. Bookings can be made up to 4 weeks ahead, though
  availability is subject to capacity. If your desired date isn't available on the app, contact customer
  care for possible accommodations.
- Last-Minute Requests: For scheduling within 5 days, directly contact our customer care team to

pased on enrollment, not attendance.

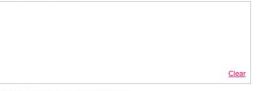
- A student will be considered withdrawn from the program if payment is not received during the week of service. Attendance will be prohibited until payment is made. A \$15 late payment fee will be assessed.
- Weekly tuition is due each Monday by 6:00 pm for the current week of services, as long as the child(ren) remains enrolled in the program.

#### **Child Discipline Policy**

All discipline toward children in the AlphaBEST program will be: Individualized and consistent for each child, appropriate to the child's level of understanding, directed toward teaching the child acceptable behavior, and directed toward teaching the child self-control. A caregiver may only use positive methods of discipline and guidance that encourage self-settem, self-control, and self-direction, which include at least the following: using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior, reminding a child of behavior expectations daily by using clear, positive statements, redirecting behavior using positive statements, using brief supervised separation or time out from the group, when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age. There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited: corporal punishment or threats of corporal punishment; punishment associated with food, naps, or toilet training; pinching, shaking, or biting a child, hitting a child with a hand or instrument; putting anything in or on a child's mouth; humiliating, ridiculing, rejecting or yelling at a child; subjecting a child to hersh, abusive, or profane language; placing a child in a locked or dark room, bathroom, or closed with the door closed; requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age.

I have read, understand, and agree to the terms and conditions. By accepting these terms, an agreement is made for payment of all fees associated with enrollment and attendance in the AlphaBEST program.

Terms and Conditions Signature \*



#### Child Care Center: Personal Rights Form

Please sign this form and bring it to the program on your child's first day.





Portola Valley-Corte Madera





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You have until 04-25-2024 9:46 am to complete the enrollment form, or your enrollment request will expire.

### Photograph Release

I hereby grant to AlphaBEST Education, Inc. and its employees, agents, successors, and assigns (together, "AlphaBEST") the permission and full legal right to use my child's name, photograph, video, or audio recording in the newspaper, magazine, television, and/or on the internet for any commercial purposes whatsoever, in perpetuity. Pictures, photographs, and videos are taken of activities from time to time for the purpose of printed matter, advertising and marketing materials, brochures, program materials, educational materials, or other publications.

I waive any right that I or my child may have to inspect or approve any printed matter or materials that may incorporate such photographs or the use to which it may be applied. I further waive any right or claim that I or my child may have for compensation related to AlphaBEST's use of the photographs, agree that this Release is given in consideration of the potential publication of my child's photograph in some manner, and acknowledge that AlphaBEST will rely upon this Release in publishing my child's photograph.

By signing this Release, I am representing to AlphaBEST that I am the parent or legal guardian of the child named below and that I have the legal right and authority to give this Release.

Elear Back Continue Portola Valley-Corte Madera Powered by Kangarootime

Photograph, Film, Audiotape, or Videotape Release Signature



## Part 3 of 3: Confirm

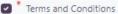
(!) IMPORTANT: Accept your enrollment offer now

This offer expires on 04-25-2024 9:46 am. Review these details carefully.

## TestAccount Norman (D.O.B 02-02-2016)

Program Summer Camp 2024 Week 01 Class Summer Excursion Camp 2024

Start Date Jun 20, 2024 End Date Jun 21, 2024 Frequency Weekly Days Thursday, Friday



By checking the box, I confirm that

1. The above information correctly reflects my child(ren) bookings.

2. I understand that these are the usual fees associated with my care. Further that these fees may change over time as notified by my care provider.