



*A Blue Ribbon
School of Excellence*

CORPUS CHRISTI SCHOOL

Superior Academics in a Christ-Centered Community

Extended Day Program 2011 - 2012

The Corpus Christi Extended Day Program provides high quality before and after school childcare in a loving, safe and Christian environment. An experienced director at each campus supported by dedicated and devoted staff members runs the program. The students participate in a variety of activities including: outdoor and indoor games; arts and crafts; homework room; quiet time for reading, movies; and holiday celebrations. Extended Day services are available for students in preschool through eighth grade at the ECC (St. Philip's Campus) and kindergarten through eighth grade at the CCE (St. Anthony's Campus). Corpus Christi Extended Day opens at 7:00 a.m., closes when the students are in school, reopens after school and closes at 6:00 p.m.

All payments for the Extended Day Program will be done through the FACTS program. This includes the registration fee, hourly fees and late pick-up fees.

The Registration Form and Extended Day Use Form can be downloaded from the home page on the school web site. Hard copies are also available in the school office.

Payment for the First Week of School:

Drop Ins

- ◆ Monday, August 29, and Friday, September 2 will be early dismissal days. The remainder of the week will be a regular school schedule.
- ◆ If you will be using Extended Day, you will need to pay the drop in rate of \$7.00 per hour (one child), \$9.00 per hour (two children) or \$10.25 per hour (three children or more).
- ◆ **When your child(ren) attends Extended Day the second time, you will be billed for the \$25.00 registration fee and must submit all Extended Day registration forms fully completed.**

Contract Users

- ◆ If you will be a contract user beginning the first day of school, you will need to pay the \$25.00 registration fee and submit all Extended Day registration forms. You will be billed at the contract rate of \$6.00 per hour (one child), \$8.00 per hour (two children) or \$9.25 per hour (three children or more).

All Extended Day forms must be turned in to the campus your child(ren) will be attending for Extended Day before Friday, August 26th. Please read the reverse side for more information.

PREPARATORY PRESCHOOL & KINDERGARTEN CAMPUS
7506 St. Philip Court Falls Church, VA 22042
(703) 573-4570 Fax (703) 573-6832

ELEMENTARY SCHOOL & MIDDLE SCHOOL CAMPUS
3301 Glen Carlyn Road Falls Church, VA 22041
(703) 820-7450 Fax (703) 820-9635

<http://www.corpuschristischool.org>



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Extended Day Payment System 2011-2012

Corpus Christi Extended Day offers quality care at an affordable price. The **FACTS** program is being used for all tuition and extended day payments. All families **must** register in the **FACTS** program for the 2011-2012 school year. The following information summarizes the various payment options:

Registration Fee

- ◆ \$25 registration fee per family per year.
- ◆ Drop In users must pay the registration fee on their **second** time of use.

Payment Structure for Drop Ins

Drop Ins: Child(ren) who use Extended Day less than five hours per week are required to use the drop in rate.

One child	\$7.00 per hour or any portion of the hour
Two children	\$9.00 per hour or any portion of the hour
Three children or more	\$10.25 per hour or any portion of the hour

Payment Structure for Contract Users

Contract: Child(ren) who use the Extended Day on a regular basis for five hours or more per week.

One child	\$6.00 per hour or any portion of the hour
Two children	\$8.00 per hour or any portion of the hour
Three children or more	\$9.25 per hour or any portion of the hour

Additional fees and charges

Any late pick-ups, after 6:00 p.m., will be charged \$1.00 per **minute** per **child**. You will be billed for these fees. Although advising us by phone that you will be late is appreciated, a late pick-up fee will still be charged. Three late pick-ups within a school year will result in dismissal from the Extended Day program.

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2011-2012

Extended Day Use Form

Kindergarten - 8th Grade

Mother's Work # _____
Email _____
Father's Work # _____
Email _____

Family Name _____

1. Child's Name _____ Grade _____

2. Child's Name _____ Grade _____

3. Child's Name _____ Grade _____

4. Child's Name _____ Grade _____

Will your child be using the bus? Yes _____ No _____
Before school _____ After school _____

Please indicate which campus your child will use Extended Day:
Elementary Campus (St. Anthony) _____ Early Childhood Center (St. Philip) _____

Which day would you like to start using Extended Day? _____
(Please note: Kindergarten students may start Extended Day on Monday, August 29, 2011.)

Indicate the days and times you need Extended Day. You will be billed based on this information.

Hours	Before School		After School	
	From	To	From	To
Monday	_____	_____	_____	_____
Tuesday	_____	_____	_____	_____
Wednesday	_____	_____	_____	_____
Thursday	_____	_____	_____	_____
Friday	_____	_____	_____	_____

Extended Day Use:

TOTAL NUMBER OF HOURS PER WEEK: _____

RATE PER HOUR: _____

WEEKLY PAYMENT DUE: _____

REGISTRATION FEE PER FAMILY PER YEAR: PAID: _____ DATE: _____

Extended Day Registration Form

Please fill in **ALL** information **COMPLETELY**.

Child's Name _____
(Last) (First) (Middle) (Nickname)
Date of Birth _____ Sex _____ Home Phone _____
Home Address _____ Apt. Number _____ City _____
State _____ Zip Code _____

Father's Name _____ Place Employed _____
Work Phone _____ Home Phone _____
Home Address _____ Apt. Number _____ City _____
State _____ Zip Code _____ Marital Status _____
Email address _____ Cell Phone _____

Mother's Name _____ Place Employed _____
Work Phone _____ Home Phone _____
Home Address _____ Apt. Number _____ City _____
State _____ Zip Code _____ Marital Status _____
Email address _____ Cell Phone _____

Person(s) or Agency Having Legal Custody of Child

Name _____ Work Phone _____
Home Phone _____ Address _____

Names of Siblings living at home

Name _____ Age _____ School Attending _____
Name _____ Age _____ School Attending _____

Allergies or intolerance to food, medication, etc. _____
Allergy Reaction _____
Action to be taken: _____

If action to be taken requires medication, please provide the medicine to the Extended Day director for storage.

Child's Physician Name _____ Phone Number _____

(Turn Over)

Emergency Contacts (if parents or guardian are not available) **PLEASE FILL IN ALL INFORMATION COMPLETELY.**

1. Name _____ Phone Number _____
Work Number _____ Cell Phone Number _____

Home Address _____ Relationship to child _____
Street City State

2. Name _____ Phone Number _____
Work Number _____ Cell Phone Number _____

Home Address _____ Relationship to child _____
Street City State

Person(s) authorized to sign child out from Extended Day. (Identification Required)

1. _____
2. _____
3. _____

Person(s) NOT authorized to sign child out from Extended Day. Appropriate paperwork such as custody papers shall be attached if a parent is not allowed to pick up a child. (Please include a photograph if available)

1. _____
2. _____

Parent or Guardian Agreement

1. The parent/guardian gives authorization for the child to participate in field trips. Yes _____ No _____
2. The child care center agrees to notify the parent/guardian whenever the child becomes ill and the parent/guardian agrees to pick child up within an hour.
3. The parent/guardian authorizes the child care center to obtain immediate medical care if any emergency occurs when the parent/guardian cannot be located immediately.
4. The childcare center has permission to list parent/guardian address and home phone number in directory. Yes _____ No _____

General Information

Child's Special Needs (If Any) _____

Does he or she require daily medication? _____

Does he or she have a medical condition we should know about? _____

Signatures

Parent or Guardian _____ Date _____

Director of Extended Day _____ Date _____

(All information requested on registration is required by the Department of Social Services under the 22 VAC 15-30-80. Code)

Office use only Date child entered Extended Day _____ Date Child left Extended Day _____