



CHELMSFORD COMMUNITY EDUCATION

170 Dalton Road
Chelmsford, Massachusetts 01824
Phone: 978-251-5151 Fax: 978-251-5154

2009 - 2010

ELEMENTARY AND MIDDLE SCHOOL EXTENDED DAY PROGRAM

Byam • Center • CommEd Center • Harrington • South Row • Parker Middle

The Extended Day Program is run by Chelmsford Public Schools and administered by the Chelmsford Community Education Office. It is located at the Byam, Center, Harrington and South Row Elementary Schools, at the CommEd Center (for kindergartners), and at the Parker Middle School.

- **Before school** (as early as 7:00 a.m.), elementary students can be dropped off at their own elementary school buildings. Middle School students can be dropped off at their neighborhood elementary schools and transportation will be provided to the two middle schools.
- **After school** (until as late as 6:00 p.m.), elementary students will stay at their own elementary buildings. The Middle School Extended Day Program is housed at the Parker Middle School and transportation is provided from the McCarthy Middle School to Parker. Children will have a snack and planned activities until parents arrive for their scheduled pick-up times.
- **For Kindergartners** who need care from 7:00 - 9:00 am and/or 3:15 - 6:00 pm, this form must be completed. In addition, if your kindergartner needs care during the other half of the school day when he/she is not in a kindergarten classroom, a separate application for the combined Kindergarten/Childcare Program will need to be completed. Feel free to call for more information.

Children must be toilet-trained before attending our program.

A \$10 early drop-off fee is charged for each 15 minutes (or portion) for each child who is registered for an 8:00 am drop-off time and arrives before then. Additionally, a \$10 late fee per child is charged for each 15 minutes (or portion) after a child's scheduled 4:30 or 6:00 p.m. pick-up time.

The Extended Day Program is available before and/or after school on a one- to five-day per week basis. The program follows the regular school calendar. A full day program (7:00 a.m. to 6:00 p.m.) is available for most school vacations and some snow days for an additional charge. The early release days are included in the cost if they fall on your scheduled days of afternoon usage; if not, they are available for an additional charge. More detailed information is available in the Parents' Guide.

Costs -- including transportation, snacks and materials -- are on the next page. Monthly charges are based on 180 school days and are broken down into ten equal payments due by the first of the month, September to June. We usually prepare and mail your next month's bill on the 21st of each month. Tuition payments are due on the first day of each month for that month. **ALL CHANGES IN YOUR NEXT MONTH'S SCHEDULE MUST BE RECEIVED NO LATER THAN THE 20TH OF ANY MONTH.** After the 20th there will be no credit for unused days. In order to prepare correct attendance sheets for each building, increases in your usage must also be received by the 20th. We do realize that there can be emergency/unplanned situations requiring additional day(s). These will be added at the per diem cost. Please understand that all late changes require our staff to update our information, notify main offices, teachers, extended day staff and busses. No credit is given for unused days. A \$10 nonrefundable registration fee is required for each child in addition to tuition. It is presumed that the child is enrolled for the full academic year. One month's notice is required if you must withdraw your child.

If you have any questions or comments, please feel free to call us.

- Ramona Bean • Maura Therrien • Linda Westland •
• Karen Martin • Connie Silvia •

Application for Extended Day Program 2009 - 2010 School Year

A separate application is required for each child.

Chelmsford Community Education
170 Dalton Road, Chelmsford, MA 01824

Name of Student _____ Start Date _____

Address _____ City _____ Zip _____

Phone _____ Grade _____ Age _____ Sex _____ Date of Birth _____

School Attending _____ Does your child have any special needs? No ___ Yes ___

If yes, please explain and list any modifications or attach a copy of the IEP: _____

Any medical conditions? No ___ Yes ___ If yes, please explain and complete the Medication Administration Authorization Form available from our office and our website: _____

Children must be toilet-trained before attending our program.

Mother's Name _____ Cell Phone _____
Address (if different) _____ City _____ Zip _____

Employer _____ Work Phone _____

Father's Name _____ Cell Phone _____
Address (if different) _____ City _____ Zip _____

Employer _____ Work Phone _____

Family's Primary E-Mail _____

Name and phone number of person to contact in case parent cannot be reached:

Name _____ Phone(s) _____

The children in the Extended Day Program are filmed occasionally for news or advertising purposes. Do you give permission for your child's picture to be used for these purposes? Yes ___ No ___

I authorize the release of school records to the Chelmsford Community Education Office.

Date _____ Parent's Signature _____

CHELMSFORD PUBLIC SCHOOLS, 2009 / 2010 ----- PARENTAL CONSENT, RELEASE FROM LIABILITY AND INDEMNITY AGREEMENT

We the undersigned father and mother or guardian(s) of _____, a minor, do hereby consent to his/her participation in child care through Chelmsford Community Education and do forever RELEASE, acquit, discharge, and covenant to hold harmless the Town of Chelmsford, Chelmsford Public Schools, a municipal department within the Town of Chelmsford, a municipal corporation of the Commonwealth of Massachusetts, and its successors, departments, officers, School Committee members, employees, servants and agents, of and from any and all actions, causes of action, claims, demands, damages, costs, loss of services, expenses and compensation on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damage which we/I may now or hereafter have as the parent(s) or guardian(s) of said minor, and also all claims or right of action for damages which said minor has or hereafter may acquire, either before or after he/she has reached his/her majority resulting or to result from his/her participation in child care through Chelmsford Community Education. FURTHERMORE, we/I hereby agree to protect the Town of Chelmsford, Chelmsford Public Schools and its successors, departments, officers, School Committee members, employees, servants and agents against any claim for damages, compensation or otherwise on the part of said minor growing out of or resulting from injury to said minor in connection with his/her participation in child care through Chelmsford Community Education, and to INDEMNIFY, reimburse or make good to the Town of Chelmsford, Chelmsford Public Schools, or their successors, departments, officers, School Committee members, employees, servants and agents any loss or damages or costs, including attorney's fees, the School Department or the Town or their representatives may have to pay if any litigation arises from said minor's intentional, grossly negligent, or reckless acts or omissions while participating in child care at Chelmsford Community Education.

Signature(s) of Parent(s) or Guardian(s) _____ Relationship _____ Date _____

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Days: M T W TH F **Circle days needed, extended day care location and the drop-off and pick-up times.**

| Location: | A 20% discount is given to additional siblings. | | | | |
|------------------|---|--|---------|--------------------------------------|---------|
| | MONTHLY RATES BASED ON: | Before School Drop Off Time 7:00 am | 8:00 am | After School Pick Up Time 4:30 pm | 6:00 pm |
| Byam AM PM | 5 Days/Week | \$240 | \$201 | \$273 | \$355 |
| Center AM PM | 4 Days/Week | \$206 | \$172 | \$222 | \$296 |
| Harrington AM PM | 3 Days/Week | \$160 | \$137 | \$174 | \$236 |
| South Row AM PM | 2 Days/Week | \$114 | \$102 | \$130 | \$170 |
| Parker PM | 1 Day/Week | \$ 67 | \$ 57 | \$ 75 | \$108 |
| CommEd Ctr AM PM | | | | | |

Before School \$ _____
After School \$ _____
Registration Fee (nonrefundable) \$ 10.00
Total due with application: \$ _____

Please indicate method of payment: Cash ___ Check # _____ Credit Card ___

Checks payable to: *Town of Chelmsford/CommEd*

To pay with a credit card: complete a separate form, which is available in our office or on our website (http://www.chelmsfordcommunityeducation.org/Credit_Card_Pymt.htm).