

ACE PROGRAM

(After Class Enjoyment)

Registration Forms for the
School Year 2018-2019

A.C.E.
After Class Enjoyment
ace@rcscherryhill.com
Cell Phone: (856-261-7997)

The A.C.E. Program at Resurrection Catholic School is provided for the families who desire both Catholic school education and supplementary day care. We provide care, supervision, and recreation in a safe and structured environment. We offer a variety of activities that include arts and crafts, inside and outside recreation, games, stories, and snacks.

Time is also set aside for the children to quietly begin their homework. The fact that homework is done at A.C.E. does not lessen the parent's responsibility to ensure completion of homework and to review what work was done.

If you need to reach the A.C.E. Program during the day (between the hours 8 a.m. and 2:30 p.m.), please call our cell phone number (856-261-7997) and leave a message or email us at ace@rcscherryhill.com. We will get back to you as soon as possible.

The A.C.E. Program will be open on all days that Resurrection Catholic is in session. A.C.E. will not operate on school holidays or snow closing days. In case of a delayed opening due to inclement weather, the A.C.E. program will open late as well. On days when school closes at 12:30 p.m. (half days), A.C.E. will begin at that time.

Every child enrolled in the A.C.E. program is expected to follow the code of behavior established by Resurrection Catholic. All children are expected to respect the staff, each other, and the materials provided.

We strive to provide individual attention, security, consistency, and fair treatment for each child in our Program. We want to work with you to make your child's stay with us a happy one. Please keep us informed of information that will be helpful to us in caring for your child.

The following rules for A.C.E. will ensure our Program operates successfully:

1. Please notify the school or the A.C.E. Program if your child is not going to be present on a scheduled day (via phone, email or a note).
2. Please send a note to the A.C.E. Program and to your child's teacher on days you wish your child to attend A.C.E.
3. Please pick up your child by 6:00 p.m. If you arrive after 6:00 p.m., you will be responsible for a late fee of \$10.00 per fifteen minutes.
4. Please sign your child out by putting your initials and time of pickup in the sign-out book.
5. Please send a written note with your child authorizing us to allow an individual other than the people listed on the registration form to pick up your child. Also, this person should be prepared to show a picture I.D.
6. Please provide lunch for your child on half days.
7. All payments are to be made by check. If you have any difficulty with this, please speak with Mrs. Webb.

**A.C.E. FEES
For
2018-2019**

Morning - 7 a.m. – 8 a.m.

\$4.00 per day

\$20.00 weekly

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Weekly - Before 4 p.m.

1st Child (\$11.00 per day) - \$55.00

2nd Child (\$10.00 per day) - \$50.00

Weekly - After 4 p.m.

1st Child (\$16.00 per day) - \$80.00

2nd Child (\$14.00 per day) - \$70.00

Weekly - Half Day - no additional charge

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Daily Before 4 p.m.

1st Child - \$12.00 per day

2nd Child - \$10.00 per day

Daily After 4 p.m.

1st Child - \$18.00 per day

2nd Child - \$15.00 per day

Daily – Half Day - \$20.00

All payments are to be made by check. If you have any difficulty with this, please speak with Mrs. Webb.

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Before and After School Care is available at Resurrection Catholic School for families who desire both Catholic school education and supplementary day care in a familiar, safe, Catholic environment. We provide care, supervision, and recreation in a warm and structured setting. We offer a variety of activities that include arts and crafts, indoor and outdoor recreation, games, stories, and snacks. Time is also set aside for the children to begin their homework quietly.

A weekly rate is available to all students who attend consistently 5 days a week.

In the event that the student's schedule changes and they are no longer attending A.C.E. on a consistent 5 days-a-week basis, the rate will be adjusted to a daily fee.

No price adjustments will be given for activities outside of A.C.E. If your child attends A.C.E. on a day when they have an extracurricular activity, they will be charged a full fee for that day.

Please return this portion with your registration forms to Mrs. Kelly addressed to the A.C.E. Program. Thank you.

1. **I have read and understand the 7 A.C.E. Rules listed on a separate sheet.**
2. **A weekly rate is available to all students who attend the A.C.E. Program consistently 5 days a week.**
3. **In the event that the students A.C.E. schedule changes and they are no longer attending A.C.E. on a consistent 5-days-a-week basis, the rate will be adjusted to a daily fee.**
4. **No price adjustments will be given for activities outside of A.C.E. If your child attends A.C.E. on a day they have an activity, they will be charged a full fee for that day.**

I have read and understand the above statements.

Parent/Guardian's Signature

Date: _____

ACE
MANDATORY
REGISTRATION AND PAYMENT REQUIREMENTS
FOR THE YEAR 2018-2019

REGISTRATION:

Please be sure to fill out the registration form for ACE.

Your children will not be allowed to attend ACE until we receive the registration form.

PAYMENT:

Weekly: If your children attend ACE on a weekly basis, payment should be made in advance either by lump sum or monthly or if it is more convenient for you, you can pay in advance on the Monday of the week your children will be attending ACE. You will be credited any days your children do not attend ACE for that month or week. If payment is not received by the end of the week they attended ACE, they will not be allowed to return to ACE until that payment is made.

Daily: If your children attend ACE on a daily basis (1, 2, 3, or 4 days a week), payment should be made in advance either by lump sum or monthly or if it is more convenient for you, you can pay in advance on the Monday of the week your children will be attending ACE. You will be credited any days your children do not attend ACE for that month or week. If payment is not received by the end of the week they attended ACE, they will not be allowed to return to ACE until that payment is made.

I agree to abide by the above requirements.

_____ Date: _____
Parent/Guardian Signature

RESURRECTION CATHOLIC
ACE PROGRAM
REGISTRATION FORM

Name of Child: _____ Grade: _____

Birth Date: _____

Address: _____

Email address: _____

*Please provide a phone number that you can be reached at all times:

Mother's Name: _____ Phone: _____

Father's Name: _____ Phone: _____

Please provide the ACE Program names and phone numbers of two adults that we may call if neither parent can be reached in case of an emergency:

Name: _____ Phone: _____

Name: _____ Phone: _____

I would like to use the ACE Program on the following days of each week:

Mornings 7:00-7:45 a.m.

Afternoons 2:45-6:00 p.m.

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

A.C.E. PROGRAM
MEDICAL INFORMATION

Child's Name: _____ Age: _____

Birth Date: _____

Parent or Legal Guardian: _____

Allergies: _____

Current Medications: _____

Special Medical History: _____

Family Doctor: _____

Doctor's Phone #: _____

Parent/Guardian Signature: _____
