



## SMS CARES

Welcome to CARES! Hope you had a great summer and are ready for a new school year. Our CARES program will begin on September 6th, and is offered daily from 3-5 pm (12-5pm on half days). There are some exceptions to this and you will be given notice of these days on the monthly calendar.

In this packet, you will find the registration form, emergency form, and parent handbook. Please complete all paperwork and return to school as soon as you can. We must have this information before the start of school in order to staff CARES the first week of school.

**IT IS IMPORTANT THAT WE HAVE THE PAPERWORK BEFORE YOUR CHILD/CHILDREN CAN STAY IN CARES.**

We're looking forward to a great school year! If you have any questions or need assistance, please feel free to ask.

Mrs. Heather Schaffer, Cares Coordinator

[hschaffer@smsnarberth.org](mailto:hschaffer@smsnarberth.org)

Mrs. Donna Dodderidge, Cares Business Coordinator

[ddodderidge@smsnarberth.org](mailto:ddodderidge@smsnarberth.org)



## **CARES HANDBOOK**

### **CARES HOURS, FEES, AND LATE FEES**

The program operates on days school is in session with the exception of some half days. (Advanced notice is given these days.) The program staff is composed of SMS teachers, SMS parents, school aides and college students. All staff members must have proper clearances.

AM CARES runs from 7:15 – 8:00 AM. PM CARES hours are 3:00 – 5:00 PM.

**REGISTRATION FEE: \$30 for one child, \$50 for families of two or more.**

#### **AM CARES (7:15 AM – 8:00 AM)**

- \$8.00/day (additional child is \$7.00/day)
- \$35.00/week (\$30.00 for additional child per family)

#### **PM CARES (3:00 PM – 5:00 PM)**

- \$8.00/hour (you pay for the time your child is here. Example: If your child stays for ½ hr , you will be charged \$4.00)

You will be billed monthly for your CARES usage.

If you know you'll be late picking up from CARES, please call the school office (the phone rings in the cafeteria), or text my cell phone (Heather Schaffer 610-842-2033), state child's (children's) name(s), and your estimated time of arrival.

We understand that lateness does happen - traffic, car trouble, public transportation is not running on time - but please be aware that late pick up on a regular basis will not be tolerated and could result in suspension of the CARES services for your child(ren).

**Late fees will occur for pick up after 5pm. This charge will be \$15 per 15 minutes. EXAMPLE: from 5pm to 5:15pm will be \$15, 5:16 to 5:30 will be \$30, etc.**

**Payment of Cares:** The Cares program is fully funded by the prompt payment of your bill. If your bill is over one month late, you will be assessed a late fee of \$25.00. If no payment is made within 6 weeks of the bill, your child will not be permitted to attend the CARES program until payment is made.



## **Rules and Regulations**

Children are to behave in a Christian manner. Every child will be treated with respect, love, and concern. All children will be encouraged to be positive, cooperative, respectful, and to demonstrate appropriate behavior. Safety is a top priority at all times. The following rules will apply:

1. All school rules apply to CARES.
2. Students must have permission from a CARES supervisor to leave the assigned area.
3. No screaming or name-calling.
4. Keep your hands, feet, and objects to yourself at all times.
5. Use indoor voices when indoors.
6. No horseplay.
7. Use of cell phones and electronic devices is not permitted. They must be turned off and kept in a backpack.
9. Students must clean up after eating and replace toys when finished playing.

### **The following behaviors will not be tolerated:**

1. Defiance, aggression and/or fighting.
2. Biting, pinching, hitting, or kicking.
3. Stealing.
4. Intimidating, harassing, threatening, or bullying others.
5. The use of profane language, gestures, or behaviors.
6. Damaging and/or destroying property belonging to the school and/or others.

## **Consequences**

Parents will be notified of any misbehavior. A report will be completed by a staff member and a copy given to the parent/guardian. Minor misbehaviors will result in an age-appropriate time-out. Major behavior issues, or a child who has ongoing instances of unacceptable behavior, may lead to exclusion from the program at the discretion of the CARES supervisor and the school principal.



## **Illness or Accident Guidelines**

Any child showing signs illness will be isolated and the parent will be notified by phone. The parent is expected to pick up the child immediately after contact. If a parent can't be reached, the supervisor will call the next person designated on the registration form. Please list the order in which you want the staff to call your emergency contacts. **If a child is injured during CARES, the staff will administer first aid, attempt to call the child's parent/guardian or call #911 (The child taken to the emergency room in the company of one of our STAFF members.** An accident report will be filled out and copies will be given to the parent and the school office)

## **SNOW and EMERGENCY CLOSINGS**

If there is a two-hour delay, there will be **NO AM CARES**.

If school is closed, there will be **NO CARES**.

If school is dismissed early, parents will be notified of operational hours for the remainder of the day. In the case of inclement weather, or any other emergency, **CARES** may not be open.

**Parents will be notified. If parents cannot be reached, we will go to your CARES EMERGENCY FORM and call those contacts. Our goal is to get all children home safely and in a timely manner, so our staff can also get home safely.**



**SMS CARES REGISTRATION FORM 2021-2022**

**(Please return these signed forms to the School Office before your Child begins our CARES program)**

Registration Fee: \$30.00 one child / \$50.00 two or more children

***Please circle the program(s) that you will be using:***

*AM CARES: 7:15 - 8:00 M, T, W, TH, F*

*PM CARES: 3:00-5:00 M, T, W, TH, F*



***(Please Print)***

Family Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_, City \_\_\_\_\_

Student First Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Allergy: \_\_\_\_\_

Student First Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Allergy: \_\_\_\_\_

Student First Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Allergy: \_\_\_\_\_

**May we give your child CIRCLE: Tylenol or Ibuprofen: \_\_\_\_\_ Yes \_\_\_\_\_ No**

NOTES:



**CARES Handbook Signature Card**

Dear Parents,

After reading the CARES Handbook, please return all signed forms to the school office Thank you! I have read the CARES Handbook and discussed pertinent sections with my child(ren).

**Print Name** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_



## **CARES SMS Emergency Form**

**(Please Print)**

Child's Last Name: \_\_\_\_\_

Child/ren name(s) & grade: \_\_\_\_\_  
\_\_\_\_\_

Home Address: \_\_\_\_\_, City \_\_\_\_\_

Home Phone Number: \_\_\_\_\_  
(Mother) Cell Phone: \_\_\_\_\_ (Mother) Email \_\_\_\_\_

(Father) Cell Phone: \_\_\_\_\_ (Father) Email: \_\_\_\_\_

**(Circle FIRST Contact: Mother/Father/ Guardian)**

**List emergency contact when parents are unavailable during CARES hours:**

(1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

Illness, Accident or Leaving School Premises: In the event of serious illness, accident, or school closing when I cannot be reached, I wish one of the following to be notified by telephone. They are authorized to act in my absence and they have signed their names on this form. They may also pick my child up from School.

(1) \_\_\_\_\_  
Name (Print) Phone Number

\_\_\_\_\_ Address

(2) \_\_\_\_\_  
Name (Print) Phone Number

\_\_\_\_\_ Address

The Following person(s) may **NOT** pick up my child:

\_\_\_\_\_