

Coastal Waters Chartered Public School  
**Extended School Day Program**  
2022-2023 Contract

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

1. I agree to pay on time and in full for each week my child is registered. I understand that payment is due on **Thursday** for the following week of care.
2. I understand that since programming costs for staff and materials are the same regardless of my child's attendance, there is no return of fees paid if my child is absent.
3. I agree to pay overtime fees of \$10 for the first 15 minutes and \$1 per minute thereafter regardless of the reason for being late. I also understand that I may be asked to remove my child from the program if overtime is habitual.
4. I understand that there is a \$25 charge for all insufficient funds, and that checks are to be made payable to Coastal Waters Chartered Public School. I understand that it is my responsibility to keep statements, receipts, or canceled checks for income tax purposes. CWCP's Federal ID number is 86-3084377.
5. I agree to walk my child into the morning program each day and to be sure a staff member is present before releasing my child. I will sign my child in each morning and/or out each evening.
6. Transportation to and/or from the program will be the responsibility of a parent or other designated person.
7. I understand that the normal operating hours for the morning program are 7:30 a.m. until the beginning of school. I understand the normal operating hours for the afternoon program are from the ending of school until 5:30 p.m. When there is a delayed opening due to weather, **the program will not operate**. When the school closes early due to weather or other conditions the program will be closed as well. The program will not run on days the school is not in operation for students, including holidays, teacher workshop days, school vacations, or early releases.
8. I understand that I may drop my child off later than 7:30 a.m. and/or pick them up before 5:30 p.m., but that does not change the program cost.
9. I agree to follow all parking procedures when I drop off and/or pick up my child.
10. I understand that all forms required must be completed and on file before my child may attend. These include the registration form with payment agreement, walking permission slip, and this contract for services.
11. I understand that I need to give written permission allowing staff to release my child to any individual other than the parent/guardian below, or those persons listed in SchoolCues.
12. I understand that the Staff cannot administer medication without a completed medical authorization form and medication in the original bottle with directions.

13. I understand that my child will be going outdoors every day, except in cases of extreme weather. I am responsible for making sure appropriate outerwear is supplied to my child.
14. I will notify Coastal Waters Chartered Public School of any changes on the Program Registration Form.

By signing below, you acknowledge that you have read and understand the policies and procedures of the Extended School Day Program:

\_\_\_\_\_

Parent Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Parent Name