



Piedmont Academy Aftercare Registration

Student Information:

Grade Level (Current School Year): _____ **Homeroom:** _____

Student's Name: _____

Address: _____

Parent/Guardian Information:

Primary/Guardian

Name: _____ **Cell #:** _____

Work #: _____ **Email:** _____

Secondary/Guardian

Name: _____ **Cell #:** _____

Work #: _____ **Email:** _____

Does the child have any ongoing medical conditions, communicable diseases, or allergies?

Yes ____ **No** ____ **If so, please describe** _____

Treatment/Medications: _____

Please complete a separate form for each student.

NOTE: Any student in PK – 5th who is **not** involved in a school sponsored activity immediately after school and who remains on campus, will be required to attend aftercare until a parent picks them up from school. The fee for aftercare will be charged to your tuition account.

Aftercare will provide structured homework time, organized activities, daily snack and drink.

Aftercare 3:00PM – 5:30PM / Monday - Friday

Structured supervision for your child

Aftercare is not provided on ½ days

One student - \$35.00 per day or \$100.00 per week.

Additional family members, on the same day - \$30.00 per student or \$85.00 per week.

To Register Contact Front Office

706-468-8818 ext. 301

Piedmont Academy Aftercare Program is for K3 through 5th grade students. From 3:00- 5:30, there will be a snack and a fun activity time. There will also be independent homework time, but due to the number and ages of the students, this will not be tutoring nor should it take the place of parent supervised homework. All children are asked to comply with the already existing rules of the school, as well as, the Aftercare rules. In order to maintain a safe environment, we ask that you please review them with your child.

Please note that if your account is not kept current, your child's participation in the aftercare program will be suspended.

“Aftercare Discipline Policy”

1. Be respectful to other students, teachers and staff members.
2. Follow all the directions the first time they are given.
3. Stay in the assigned area.

As with any other zero-tolerance policy, there will be consequences for the following types of misconduct:

1. Failure to follow rules, policies and procedures of the Aftercare Program.
2. General misconduct, including loud or boisterous behavior that tends to disturb other students, and includes running in the classroom/halls, minor defacement of property, and pushing or shoving others.
3. A student's persistent refusal to follow the instructions of program staff.
4. Mutual physical confrontations between students (fighting).
5. A behavior that may result in physical or mental abuse of one's self.

“Disciplinary Actions”

1. Verbal reprimand
2. Special assignments or removal from the classroom
3. Parent Contact
4. Suspension from After School

*Note: The program staff is responsible for utilizing different intervention techniques before a student is referred to the school administration.

“Inclement Weather Policy”

*If school is canceled, the Aftercare Program will be canceled.

“Child Pickup Policy”

*For the safety of your children, he/she will only be released to the parents or designated pickup person. Should another adult be picking up your child, please send a written notification and be advised that they may be asked for photo identification. Once a child is released to his/her parent or designated pickup person, the child's care and safety are the responsibility of the parent or designated adult.

*In order that your child is not left feeling confused or upset, we ask that you make every attempt to pick up your child on time. There will be a late fee if your child is not picked up by 5:30 p.m. (\$5 for every minute after 5:30 p.m.)

*If there are special arrangements regarding parental custody – please provide documentation.

Authorized Emergency and Pick Up Contacts:

1) Name: _____

Relationship: _____ Cell: _____

2) Name: _____

Relationship: _____ Cell: _____

3) Name: _____

Relationship: _____ Cell: _____

4) Name: _____

Relationship: _____ Cell: _____

“Aftercare Cost”

I have read and reviewed the Piedmont Academy Aftercare Policy. I, the undersigned do not hold Piedmont Academy or any persons thereof, responsible for any loss, damage, or injury during care.

Child's Name: _____

Parent/Guardian's Name: _____

Parent/Guardian's Signature: _____

Date: _____