

KJ AFTERSCHOOL

Owners: Mr. Kinlaw and Mr. J

Greensboro Academy is pleased to offer an afterschool program this school year. We will offer a structured balance of academic & homework time, social & snack time, and recreational indoor & outdoor activities for students in Kindergarten through 8th grade. We are very excited to offer the option of both a 5 day program and a 3 day program for families.

Hours of Operation

Monday – Friday

3:45 P.M. – 6:00 P.M.

**A snack is provided each day!*

Duration

August 21, 2014 – June 5, 2015 (last day of school)

***Please note: We will be open on full school days only.**

Students

Kindergarten – 8th Grade

Program Options for Enrollment

☐ Choose Option 1

Flexible 5-day or 3-day program. Pay for use each week: 4-5 days - \$65, 2-3 days \$50.

(If using KJ services for one day in a week, pay the option 2 rate of \$25.)

\$20 Registration fee is required.

If choosing the 3 day rate, indicate here which three days you will most regularly use: M___ T___ W___ Th___ F___

☐ Choose Option 2

Drop-in service. Student data sheet is on file. Students may use the service as needed at a cost of \$25/day.

\$20 registration fee is required.

****If special help is required for your child's homework time due to an Individualized Education Plan, or any other needs, please write in needed information for the KJ staff on the back of this page.****

If you have any questions regarding the KJ Afterschool Program, please contact Chad Johnson at 20.cjohnson@heritageacademies.com or Jeff Kinlaw at 20.jkinlaw@heritageacademies.com.

Daily Activities: Kindergarten - 8th Grade Students

All Call-3:50pm: Arrival, check-in and snack (K and 1st graders will be escorted to the Afterschool Room for the first 5 days)

3:50pm-4:45pm: All students will work to complete their homework.

4:45pm-5:30pm: All students will have all remaining time to use the playground facilities.

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Registration Form

Child's Name _____ Age: _____ DOB: _____ Grade: _____ Teacher: _____

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Parent/Guardian Name(s): _____

Home Address: _____

E-mail Address: _____

Cell #: _____ Work #: _____ Home #: _____

1st Emergency Contact's Name: _____ Relationship: _____

Phone #: _____

2nd Emergency Contact's Name: _____ Relationship: _____

Phone #: _____

Does your child have any allergies? Yes or No

If yes, what are they allergic to, and do they need an epi-pen? _____

Does your child take any medications? Yes or No If yes, what medication? _____

Behavior Expectation

Each child will be expected by the staff to maintain equal behavior standards to that of Greensboro Academy.

Discipline Policy

Discipline issues will be handled on a case by case basis at the directors' discretion.

Late Fee

Any parent that has not picked up their child 6:00pm will be charged an automatic late fee of \$5.

Financial Agreement:

I _____ agree to adhere to the payment schedule as follows:

Payment for each week is due on Monday.

Failure to make this payment will result in a late fee of \$20.00.

I acknowledge and represent that I have read, understand and accept all terms stated in this document. I have discussed the expectations of behavior with my child. My signature below indicates that I agree to adhere to all policies, agreements, waivers and procedures.

After School Participant's Name

Signature of Parent/Guardian

Date