



Freedom Crossing Academy

Extended Day Enrichment Program

2024-2025 Registration Form

Non-Refundable Registration Fee \$85.00 per child
 Advanced Registration for next school year
 *(\$75.00/child if registered from April 1st-May 24th)

STUDENT ALERTS

Please check here, detail in section below:

Medical

Legal (court documents must be present)

IEP

504

Program Needed: (Please Only Select One):

AM Morning Care Only AM/PM Morning & Afternoon Care PM Wednesday Care Only

PM Afternoon Care Only St Johns County School District Employee

Child's Name _____
 (Last) (First) (Middle Initial) (Nickname)

Child's Birthday _____ Gender: Male Female Grade _____ Teacher _____

Child resides with: Both Parents Mother Father Other Name of Guardian _____

Parent/Guardian:

1. Name _____ Relationship _____

Address _____ Email _____

Cell# _____ Work# _____ Employer _____

2. Name _____ Relationship _____

Address _____ Email _____

Cell# _____ Work# _____ Employer _____

3. Name _____ Relationship _____

Address _____ Email _____

Cell# _____ Work# _____ Employer _____

4. Name _____ Relationship _____

Address _____ Email _____

Cell# _____ Work# _____ Employer _____

Alternate Pick Up/Emergency Contact List:

I authorize the staff of Freedom Crossing Academy Extended Day to allow the following persons to pick up my child from Extended Day. They may also be contacted in the event of an emergency such as illness or accident. **(Must have at least one contact listed).**

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Freedom Crossing Academy Extended Day Enrichment Program Registration page 2 of 3

Alternate Pick Up/Emergency Contact List (Continued)

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Medical Information:

Physician's Name _____ Phone _____

Address _____

List of Allergies, Medical Concerns, and/or special Needs: _____

Authorizations for Emergency Care: In case of accident or serious illness, I hereby authorize Freedom Crossing Academy Extended Day to provide the necessary immediate care. In the event that they are unable to reach me, I hereby authorize the contact of Emergency Services.

Initials _____

Medical Alert Disclosure

If your child has an "ALERT" marked on their registration sheet, a detailed explanation will be on the group leader's attendance sheet. This is a continued effort to keep every group leader aware of every child's medical or legal concern. We are aware of the sensitive nature of this information; therefore one copy (the Group Leader's copy) will have detailed information about your child's "ALERT" while the other copy (parent check-out copy) will not have any detailed information. While our staff recognizes that this information is a private matter, there is always a chance that the other students may observe the information on the attendance sheet due to the close interaction that the students and group leaders have. For the purpose of my child's safety,

_____ I AM IN AGREEMENT with the "ALERT" disclosure

_____ I AM NOT IN AGREEMENT with the above disclosure and request that my child's information may not be disclosed on the group leader's attendance sheet.

General Release of Liability

The undersigned agrees to release and forever discharge Freedom Crossing Academy Extended Day Program and the St. Johns County School Board, their officers, servants, agents and employees from all claims and demands, rights and causes of action of any kind the undersigned now has or hereby may have on account or in any way arising from personal injuries and/or property damage known or unknown to the undersigned at the present time that results from an occurrence which may happen to the below stated child/children during time spent in the FCA EDP, barring proven supervisory neglect.

Initials _____

FCA Extended Day Program Rules, Regulations and Payment Schedule

I have read and understand the rules, regulations and payment schedule of the Freedom Crossing Academy Extended Day Program as explained in the FCA Extended Day Information.

Initials _____

Photograph Consent

I give FCA Extended Day consent to photograph or videotape my child. These photos/videos will be used solely for the FCA Extended Day, and possibly the FCA Yearbook or FCA Extended Day Website. No names will be used on the website.

Initials _____

Homework expectations

Students in grades K-8 will be provided and expected to utilize their allotted homework time to work responsibly and independently with help available as needed. Occasions may arise when a student's teacher would like to pick them up from morning care or after care to give additional instruction, make up tests etc. in their classroom.

Initials _____

Freedom Crossing Academy Extended Day Enrichment Program Registration page 3 of 3

Important Information Check List

The Freedom Crossing Extended Day Enrichment Program remains committed to the safety, security and well-being of each and every child in our program. Our staff is dedicated to this mission. This is a re-affirmation that you understand the above policies in their entirety in order to ensure that we provide the best care to each and every family. We will enforce the aforementioned policies to ensure that we provide the best service possible to you the community. There will be **NO EXCEPTIONS**, therefore it is vital that you are very familiar with the expectations of program and you agree to all. This will allow us to minimize inconvenient suspension of your services.

Program Requirements - Please initial on the line provided, that you have read and understand each item.

_____ All registration forms must be completed in their entirety and submitted with the registration fee and first two month's payment, before service is allowed to begin. Payments will be due for the upcoming month by the 15th of each month. (Please refer to the Payment Fee Schedule that is on the Extended Day Website). This program is subject to the Florida Constitution, (Article VII, section 10) which states all accounts **MUST** maintain a paid in advance status. Your account will be assessed a \$5.00 late fee for every 5 days payment is late. If payment is not received before the first day of the billing period that payment covers, it will result in a suspension of your service until the account is brought current. This includes any late fees that have been incurred. Envision Solutions is responsible for handling checks that are returned to due insufficient funds, and additional charges will be required to be paid separately directly to Envision Solutions.

_____ All checks and/or cash payments must be submitted at the time of drop off or pick up by a responsible adult party. You may pay for services via your credit card at Schoolpay.com. You may also ask your bank to submit the check via their Auto-Pay (Bill Payer) services if this option is available. **If** you are not able to make payment at the time of pick-up or drop off, and you must, **as a last resort**, send a check in via your child please be sure that this payment is as follows; Check only (with child's name in the memo section), in a sealed envelope, marked Extended Day. This will help to avoid Extended Day payments ending up in lunch accounts.

_____ Invoices and Receipts are available via email upon request. If you would prefer a hard copy be printed please stipulate this in your request. Please be advised, that although Invoices are not mailed on a regular basis, it is your responsibility to make your payment on time according to the Fee Schedule located on the Extended Day website. If you have questions regarding this schedule, please contact us to make sure that you are paying the correct amount.

_____ All Students must be signed out and picked up by someone whose name is listed on their Extended Day file. Please inform all parties listed they will need to have a picture ID when picking up the student. Students are not allowed to ride their bikes or walk home without the supervision of the authorized person. These procedures are for the safety of your child.

_____ **Dismissal Changes must be communicated to the school before 1:30 (12:30 on Wednesdays)**. You can do this by contacting the FCA Transportation email at FCAtransportationchanges@stjohns.k12.fl.us and/or sending an email to the teacher and Extended Day Coordinator. This will allow us to know that your child will not be in Extended Day for the current day or time frame as stipulated in your email. The desired form of dismissal should also be included in your email; this will help to ensure that your child gets to where he or she needs to be. **If we do not receive communication from you, it will be assumed that your child must come to Extended Day and will not be permitted to leave the way he or she thinks they are supposed to.**

_____ There will be extra fees assessed for LATE PICK-UP. Extended Day Closes at 6:00 PM (**5:00 PM on December 21st & May 24th**) The first violation will serve as a warning. Subsequent violations will result in a fee of \$1.00 per minute for every minute after 6:00 PM per child. After the third offense use of the program may be suspended for the remainder of the year at the discretion of the Coordinator.

_____ It is the mission to keep all children safe while in the care of Extended Day. If your child is a hindrance in our ability to maintain a safe environment there will be consequences. If a child continues to show inappropriate or disruptive behavior, after a conference with administration they may be removed from the program at the discretion of the Coordinator, this is to ensure a safe and happy environment for all children. Make sure to go over the rules with your child, as you BOTH will be held accountable. Please pay attention to any notes sent home concerning inappropriate behavior.

_____ All Students taking part in our Extended Day program **must be potty-trained or self-sufficient when bathroom needs arise**. Children may be admitted, based upon their needs and appropriateness of the program for the child. If determined that staff training, staff to child ratio, or facilities used creates an undesirable situation for your child, other children and/or the staff, the coordinator will advise the Principal and we will request that your child not participate in the program.

_____ **PG Rated Movies** maybe shown in Extended Day. We carefully review these movies before to ensure that there is nothing inappropriate for k-8th grade aged kids. If your child is allowed to view PG Rated movies, please initial. If you do not want your child to view PG Rated Movies, please do not initial and alternative arrangements will be made during the movie viewing time.

_____ If you should need to discontinue our services, please give us **two-weeks written notice** (note or email). If you have any outstanding debts, you are still responsible for paying them. **Any refund requests must be made within 2 weeks of withdrawal or the amount will be forfeited. Note: If we are not aware of your plan to discontinue our services, you will be responsible for the entire month's fee.**

_____ I have read and have a full understanding of all rules and policies enclosed in the Extended Day Enrichment Program's Policy & Procedures Handbook, which may be found on the Extended Day page of the Freedom Crossing Academy's school website.