KEEP A COPY

CAA AFTER SCHOOL PROGRAM FAMILY CONTRACT

Since 2003, Croton Academy of Arts has provided unique programs that foster creativity, communication,

self-awareness, confidence, and social interaction. Our guiding principles for the Croton schools is to provide

a warm, safe, supportive, enriching and creative environment for all students. Croton Academy of Arts After

School Program is licensed by the Westchester Child Care Council to provide after school care to Grades K-7.

This contract is made effective as of \_\_\_\_\_\_\_\_\_\_\_\_ by and between the following parties:

“Provider” Croton Academy of Arts (CAA)

 8 Old Post Road South, Croton on Hudson, New York 10520

 afterschool@crotonacademy.org , (914) 862-0988 \ **and**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_Croton on Hudson\_\_ NY Zip \_\_\_\_\_\_\_

Place of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_work number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

 E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To provide care for: Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (a separate contract and health form must be submitted for each child)

The Undersigned Caregiver(s) hereby gives CAA permission to care for the above child(ren) in accordance with this Contract. In consideration of the mutual agreements and covenants contained in the Contract, the parties agree to the following:

**CONTRACTED DAYS** The Provider shall provide child care services and the Parent/Guardian shall pay for such services as follows:

❑ Monday ❑ Tuesday ❑ Wednesday ❑ Thursday ❑ Friday

This schedule will be in effect unless terminated sooner by either party in accordance with this Contract.

The Parent/Guardian shall pay CAA After School tuition based on the above schedule at the rates specified below. Fees will not be adjusted for late arrival, early pickup, or missed days, except as provided by the Contract. There will be no refunds.

**By signing this Contract, the undersigned represents that they understood and agreed to the terms and conditions of this Contract. Breach of this Contract in any way by the Parent/Guardian may result in immediate termination of services.**

Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby release the Directors and all employees of Croton Academy of Arts from all claims of liability for any damage or injuries which may be sustained by my child in the After School program or any class at the CHUFSD.

parent/guardian signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby give permission for my child’s photograph to be used for program purposes.

parent/guardian signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROGRAM SCHEDULE**

**CET** 2:30-6:00 pm (grades K-3) **PVC** 3:00-6:00 pm (grades 4-7)

**ADMISSIONS POLICY**

It is CAA policy to admit students of any race, creed, color, gender identity national or ethnic origins.

**REQUIRED FORMS FOR ATTENDANCE AT CAA AFTER SCHOOL**

In order to secure a child’s spot in the program, families must register online and submit the Contract, Pick Up

Authorization/Emergency form, and, NYS Day Care enrollment form.

**Mandatory Allergy Forms (if applicable):** If your child needs medication for anaphylaxis or an inhaler, the following forms must be completed before your child can attend the program.

7006 Individual Healthcare Plan ; 0792A Allergy Emergency & 7002 Medication Consent

Please note that we do not have authorization to administer medication unless it is a medical emergency.

*All forms must be completed in their entirety, signed and submitted before the child attends the program.*

If any children have been exposed to a contagious disease, families will be notified. If your child is exposed to

or contracts an illness which could affect others, you are required to contact us immediately.

**PROCEDURES:**

**ARRIVAL/ PICK UP**

**CET** - **(914) 271-2829** - students Grades 1-3 walk to our program from their classrooms. Kindergartners are

escorted to our program by a teacher until mid year. Pick up is any time up to 6:00 pm.

**PVC** - **(914) 271-1044** - Students, grades 4-7, report directly to our program immediately after school.

Students may participate in PVC after school clubs or homework helping period before checking into CAA but

caregivers must inform the Site Supervisor in advance. 4th grade students are bussed from CET to PVC each

day. Pick up is any time up to 6:00 pm. Caregivers must call PVC and we will escort your child to you.

After attendance, students may take advantage of a variety of activities each day including indoor and outdoor

games, fine arts & crafts and science & nature study.

CAA offers after school care for two to five days weekly. As a service to our after school families and

responding to their needs, we offer an emergency drop-in program, for a single day, if the need arises. We

offer this program pending space reflecting the regulated child/teacher ratio for any given day.

**PICK UP/AUTHORIZATION** - CAA staff cannot release a child to any person other than those listed in our

parent/guardian contract.

PVC - Staff will meet caregivers at Door #19 to sign their children out. PVC students may be released as

walkers with written caregivers permission.

CET - Staff will meet caregivers at the back entrance of CET to sign students out.

**TUITION AT CET/PVC AFTER SCHOOL/ PAYMENT METHOD**

Tuition is charged based on a 10 month school year and divided into 10 uniform monthly payments.

(Tuition is not specific to individual days - holidays, early dismissals, snow days, sick days or personal

absences.)

 We will process your first month based on the number of children registered and the days selected during the registration.  This creates a "membership" that renews monthly. Tuition is based on a 10 month school year and divided into 10 payments.  It is not specific to individual days in the month that your child is registered for.  Early dismissals, snow or sick days, and personal absences do not reduce monthly tuition charges and cannot be substituted or refunded.

 No changes may be made for the first month after the contract is submitted and tuition is paid.

 Subsequent months will be processed automatically on the 25th of the month.  You must notify Croton Academy of any changes by the 20th of the month for the following month.

 Croton Academy cancels membership in June so families are not charged for the summer.

**Monthly Tuition rates:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **1 Child** | **2 Children** | **3 Children** |
| **2 days / week** | $ 325 | $ 600 | $ 800 |
| **3 days / week** | $ 425 | $ 775 | $ 1000 |
| **4 days / week** | $ 495 | $ 900 | $ 1150 |
| **5 days / week** | $ 555 | $ 1000 | $ 1265 |

***Please contact Croton Academy of Arts if you plan to send two or more children on different days of the***

***month. A custom tuition is available.***

Drop in tuition -The CAA drop in program is available on an emergency / as needed basis, to

families currently enrolled in the after school program. The fee is $45 per child per day or $70 for two

children/per day. Families will need to make arrangements at least a day in advance to guarantee that there

will be enough space available on any given day.

**ADDITIONAL POLICIES**

**Calendar, early dismissals and school closures:** The program adheres to Croton-Harmon’s academic

calendar, and weather-related or other early dismissals. Each family should have at least two emergency

contact numbers, including one that is local, for emergencies.

CAA and the CHUFSD have procedures in place to inform school district families of emergency procedures.

CAA After school care is not open on half days, early dismissal days or for Parent/Teacher Conferences.

**ABSENCES/DISMISSAL CHANGES:** Families must contact CAA at afterschool@crotonacademy.org

for any absences. CET & PVC schools and the transportation department do not share attendance information

with Croton Academy.

**Monthly schedule Changes**

Email CAA to request changes to a child’s schedule to either drop or add days or to discontinue the program.

Days may be dropped at any time but we cannot hold spaces. Days may be added if there is space in the

Program. Notification after the 20th of the month will result in a $45 processing fee.

Notify CAA, PUPS, the CET/PVC classroom teacher in writing of schedule changes.

**Pick up Authorization/ Emergency contact form**

**CHILD’S NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_**

**AUTHORITY TO PICK UP CHILD** The following person(s) has authority to pick up the child(ren)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell number: \_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Parent/Guardian shall inform Croton Academy in advance if someone other than the Parent/Guardian or person(s) listed above will pick up the children.

**DOES NOT HAVE AUTHORITY TO PICK UP CHILD**

The following person(s) does not have authority to pick up the child(ren).

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMERGENCY CONTACTS** In case of emergency, Croton Academy of Arts will first try to reach the Parent/Guardian. CAA will need at least one of the three emergency contacts listed to be local to Croton on Hudson.

1.Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship: \_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_

Cell Number: \_\_\_\_\_\_Ok to text \_\_\_\_\_ Other phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship: \_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_

Cell Number: \_\_\_\_\_\_\_\_\_\_\_Ok to text \_\_\_\_\_\_\_ Other phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: NY\_\_\_\_ Zip: \_\_\_\_\_\_

Cell Number: \_\_\_\_\_\_\_\_\_\_\_\_\_Ok to text \_\_\_\_\_\_ Other phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Croton Academy of Arts is a 501(c) (3) not for profit corporation

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