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Michele Pasquale, *Principal*

September, 2016

Dear Parents,

Saint Brendan's After-School Program will begin on Monday, September 12th for grades K-8, and for Pre-K it will begin on Monday, September 19th. To enroll your child in the program, return a completed application form and staff from the office will refer you to SMART for payment enrollment. If your child receives a scholarship please contact the office regarding fees. **All monthly fees must be submitted through SMART; the office is no longer accepting payment in the office.**

*****NO CHILD MAY ATTEND THE SAINT BRENDAN PROGRAM UNTIL THE REGISTRATION FORMS AND FEE ARE PAID. *****

Saint Brendan's After-School Program provides children with a safe, caring environment staffed by professional teachers. Children who have been in school all day need an opportunity for different forms of recreation before concentrating on homework and other academics. With this in mind, the program is organized with special times for individual and group activities, outdoor playtime (weather permitting), arts/crafts, as well as an opportunity each afternoon for homework, study and reading.

The philosophy, Christian values, and goals that permeate Saint Brendan School provide the foundation for our After-School Program.

We look forward to working with you to provide an After-School Program that will meet the needs of your child.

Sincerely,

Ms. Michele Pasquale

Ms. Michele Pasquale
Principal

Saint Brendan's After-School Program Application 2016 -2017

-ALL ITEMS MUST BE COMPLETED-

(PLEASE PRINT NEATLY)

Student Name: _____ Grade _____

Address: _____ Apt # _____ City _____ State _____

Home Telephone: () _____

Mother's Name: _____ Work # () _____

Cell or other # () _____

Father's Name: _____ Work # () _____

Cell or other # () _____

If your child is sick, or in the event of an emergency, and we are unable to contact you, list the full name and working telephone numbers of relatives that we may contact. If your child is not picked up by 6:00pm by a parent / guardian, we will contact the people listed below to pick up your child.

1. Name: _____ Phone: () _____

2. Name: _____ Phone: () _____

List the complete name and working telephone number of any person you AUTHORIZE to pick up your child from Saint Brendan's After-School Program. Please indicate if your child is ONLY to be released to his/her parent/guardian.

1. Name: _____ Phone: () _____

2. Name: _____ Phone: () _____

List all allergies, medications. Special conditions (asthma, etc.) that relate to your child:

Complete BOTH SIDES of this application and the *\$50 registration fee for afterschool will be paid through SMART TUITION.

Return the application to the school office in a clearly labeled envelope.

Please check the program that you would like to enroll your child in: (check one)

1. FULL TIME PLAN "A" _____ \$200 per month
_____ \$175 per child per month 2 or more

This applies to any child attending **3 or more days per week but is picked up by 6:00pm.**
Payment is due on or before the 20th every month (including September) via SMART.

2. PART TIME PLAN "B" _____ \$125 per month
_____ \$100 per child per month 2 or more

This applies to any child attending the program **no more than 2 days per week till 6pm.**
Payment is due on or before the 20th every month (including September) via SMART.
If your child attends more than 2 days in any week you will be charged the full time rate of \$200.

3. EARLY PICK UP PLAN "C" _____ \$95 per month
_____ \$60 per child per month 2 or more

This applies to any child attending the program five (5) days a week but **is picked up by 4:00 pm every day.** Payment is due on or before the 20th of every month (including September) via SMART

*****If your child receives a scholarship please contact the office regarding fees. *****

All payments are to submitted through SMART and if received AFTER the 20th will be assessed a \$45 late fee.

**Pick up each day is to be BY 6pm. There is a late pick-up charge of \$25 for every 15 minute period.
(Or any part thereof).**

*****The administration reserves the right to remove a child from the program, when the administration, in its judgment, deems such action appropriate. *****

*****Please initial here if you have received a copy of the After- School Guidelines _____ *****

Parent signature: _____ Date: _____