

# SACC

(SCHOOL AGE CHILD CARE)

## *OLIVET SCHOOL*

SECOND THROUGH EIGHTH GRADES

BEFORE AND AFTER CARE

SEPTEMBER 2019 - JUNE 2020

**All registrations for the 2019-2020 School Year must be received on or before August 16, 2019 to be able to use SACC the first week of school in September.**

**Registration will reopen on Monday, September 9, 2019.**

Please send registration forms to:

SACC

Pittsgrove Township Board of Ed.

1076 Almond Road

Pittsgrove, NJ 08318

## SCHOOL AGE CHILD CARE - OLIVET SCHOOL

The Before- and After-School Child Care Program is a program aimed at meeting the needs of children, parents and community. Based upon need, we will provide child care for Olivet School and PTMS students during the hours when school is not in session for them.

**WHO:** This program is for students attending Olivet School only.

**WHERE:** Cafeteria at Olivet School.

**WHEN:** Beginning at 6:30 AM - Before Care  
Ending at 6:00 PM - After Care

Open on early dismissal days. This program will follow the school calendar.

**WHAT:** A carefully planned program designed to meet the needs of elementary and middle school students in a supervised environment. Students can participate in specially planned before- and after-school activities. Indoor and outdoor activities are planned. Snacks are provided. Parents must provide transportation to and from the program.

**TUITION:** Registration is for the school year. Tuition is paid in 10 installments by the 15th of the month. Invoicing begins in September and ends in June for monthly students. Daily students will receive their first statement on October 5<sup>th</sup> for September usage and June 15<sup>th</sup> for June usage respectively.

The last day of the school year will be the last day of the program.

**Parents are to inform SACC in writing (Rosellen Edmonds, redmonds@pittsgrove.net) if their child will be staying for SACC if they use the program on an "as needed" basis.**

Send the completed packet (4 pages) to:

**SACC**

Pittsgrove Township Bd. Of Ed.

1076 Almond Road

Pittsgrove, NJ 08318

Please do not apply online. Our office will set up your family in the system.

**New enrollments should include a one-time \$60 registration fee.**

If you have any questions call Laurie Havens at the SACC Office at 358-3094, ext. 4034.

# EMERGENCY CLOSING PROCEDURES

## 1. Delayed Morning Opening

If morning conditions are hazardous, the opening of school may be delayed by one hour. This gives the transportation department more time to ready buses and the maintenance department time to clear parking lots, sidewalks, and check building conditions. This extra hour also gives administration additional time to make a decision to close school especially if conditions worsen.

**SACC will open one hour late if the opening of schools are delayed by one hour. Olivet and PTMS SACC will then operate from 7:30 AM until the opening of school. SACC will not open if schools are then closed.**

Delayed Openings rarely occur however we need to be prepared for this to happen.

## 2. Early Emergency Closing

If weather conditions become hazardous and are predicted to worsen, school may be closed early and students transported home.

SACC will make a decision about remaining open and for how long we will stay open with the advice of the Superintendent.

- (1) If conditions are severe, SACC will not open then you must pick-up your child at the school dismissal time, make arrangements for your child to be picked-up or give direction to send your child home on the bus. Plan this out ahead of time.
- (2) If conditions are moderate, SACC will remain open for a specified period of time (such as until 4:00 PM). At the SACC designated closing time, your child must be picked-up. Plan and arrange for a pick-up person ahead of time.
- (3) If conditions are worsening, SACC will remain open for a limited time (such as until 2:00 PM) to give you additional time to pick-up your child. Plan and arrange for this ahead of time.

**The key is to plan ahead and inform SACC of the arrangement. We do not want children going home on buses to unattended homes or staying at school or SACC awaiting your pick-up and you are waiting at home for the bus.**

# OLIVET SCHOOL SACC PRE-REGISTRATION

Send this packet (4 pages) to hold a place for your child to:

SACC

Pittsgrove Township Board of Ed.

1076 Almond Road

Pittsgrove, NJ 08318

Parent/Guardian's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Home # Street OR PO Box # Town State Zip

Father's email address \_\_\_\_\_

Mother's email address \_\_\_\_\_

Please fill in information for child(ren) who will be participating.

NAME	AGE	AM DROP-OFF TIME	PM PICK-UP TIME
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_____	_____	_____	_____
_____	_____	_____	_____

**DAYS PER WEEK CHILD WILL BE ATTENDING:** MON TUES WED THUR FRI  
(CIRCLE ALL THAT APPLY)

PLEASE INITIAL HERE FOR "AS NEEDED BASIS ONLY" \_\_\_\_\_AM \_\_\_\_\_PM

Starting Date: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

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## SACC-Olivet--REGISTRATION AGREEMENT

I understand that I am enrolling my child \_\_\_\_\_ for the 2019-2020 school year. I understand that on days school is closed there will be no program or a modified program if school opens late.

I understand that the fees are divided into 10 equal monthly payments based on 180 school days. I understand that I am responsible for monthly payments of contracted fees to be paid by the due date. For those paying the discounted monthly rate, the due date is the 15th of each month for that month. The first payment is due by the 15th of September. For those paying as needed, the due date will be the 15<sup>th</sup> of each month beginning in October. If monthly payments are late, a late fee of \$25 will be assessed. If monthly payments are two months delinquent, SACC services will be terminated.

If my child is having problems adjusting to the program, a conference will be arranged between myself and the staff. If there are behavior concerns that cannot be addressed through SACC, a child may be removed from the SACC Program.

In the event of illness, vacation, or other absences such as Scouts, music lessons, and other after-school activities, the SACC Program staff will be notified. Regardless of other activities, I am responsible for my child's full tuition payment in the SACC Program. Communication with the SACC staff can be arranged through the SACC office;  
--- Laurie Havens 856-358-3094, ext. 4034, lhavens@pittsgrove.net  
--- Olivet School SACC phone, 358-6175  
---emailing Rosellen at redmonds@pittsgrove.net

The SACC staff will assume full responsibility for my child from the time he/she arrives at the program until dismissal time. AM children will be sent to their regular classroom teacher or dismissed to the playground. Dismissal time for PM children will be 6:00 PM or earlier. Each child must be signed in or out by an authorized person at the designated drop off or pick-up time. If the drop-off or pick-up time varies from the scheduled time, notification should be made at the SACC office. If arrangements are not made for the time change, an additional fee will be charged.

I give my permission for my child to participate in walks and field trips. Details and information about field trips will be provided.

If a medical emergency arises, the SACC Program staff will first attempt to contact me (parent/guardian). If I (parent/guardian) can't be reached, the SACC Program staff will contact the child's doctor. If the emergency is such that immediate hospital attention is necessary, my child may be taken to the hospital.

I agree to adhere to the SACC Program registration agreement and procedures and give my child permission to participate fully in this program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***The Pittsgrove Township School District prides itself on providing your son/daughter with a safe, before and/or after-school environment through the School Age Child Care (SACC) Program. In order to maintain safety and compliance, we ask that you adhere to the designated pick-up times for your child.***

***In the event that you cannot pick up your child at the designated time, please contact the SACC Program at your child's school. If your child is not picked up from the SACC Program by 6:20 p.m., and we have not heard from you, and cannot reach you, please be advised that the New Jersey State Police will be contacted. Your child's safety is our priority.***

**SACC-Olivet  
ENROLLMENT FORM**

CHILD'S NAME                      SCHOOL                      GRADE                      AGE                      DOB                      SEX  
\_\_\_\_\_                      OLIVET                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

TIME OF CHILD'S AM ARRIVAL: \_\_\_\_\_ TIME OF CHILD'S PM PICK-UP: \_\_\_\_\_

DAYS OF THE WEEK CHILD WILL ATTEND: MON TUES WED THUR FRI  
(CIRCLE ALL THAT APPLY)

PLEASE INITIAL HERE FOR "AS NEEDED BASIS ONLY" \_\_\_\_\_ AM \_\_\_\_\_ PM

Parent(s) or guardian(s) with whom child resides:

\_\_\_\_\_  
Name    Mailing Address    Home phone

\_\_\_\_\_  
Work phone    Work hours/days    Cell phone

\_\_\_\_\_  
Name    Mailing Address    Home phone

\_\_\_\_\_  
Work phone    Work hours/days    Cell phone

Persons authorized to pick-up your child in addition to those listed above. Any changes in this list must be received from you in writing.

\_\_\_\_\_  
Name    Mailing Address    Home phone

\_\_\_\_\_  
Relationship    Work phone    Cell phone

\_\_\_\_\_  
Name    Mailing Address    Home phone

\_\_\_\_\_  
Relationship    Work phone    Home phone

Child's Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

PARENT'S SIGNATURE \_\_\_\_\_

# SACC-Olivet

## EMERGENCY CLOSING INFORMATION

STUDENT NAME: \_\_\_\_\_

MOTHER: \_\_\_\_\_ FATHER: \_\_\_\_\_

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Mother's Employer	Work Phone	Cell Phone
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Father's Employer	Work Phone	Cell Phone
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**\*\*\*\* If employment or phone # changes, we must be notified. \*\*\*\***

If your child(ren) are normally an afternoon SACC participant, and school closes early, SACC will try to remain open. Unless informed otherwise, we will keep your child.

Morning ONLY SACC participants will not be kept unless we are notified by you.

If SACC has to close early or completely - check below which parent to call and phone # of same.

\_\_\_\_\_ Mother Phone number: \_\_\_\_\_

\_\_\_\_\_ Father Phone number: \_\_\_\_\_

Additional phone numbers if parents cannot be contacted:

\_\_\_\_\_  
\_\_\_\_\_

Parent's Signature \_\_\_\_\_

DATE