

Related To:

YOUNG ACHIEVERS LEARNING CENTER, INC.

215-698-2347

AGREEMENT FOR BEFORE & AFTER SCHOOL SERVICES CONTRACT

55 PA CODE CHAPTERS 3270.123 & 181(C); 3280.123 & 181 (C); 3290.123 & 181 (C)



Start Date _____ Withdrawal Date _____ School Year _____

Child: _____ (male/female) SS# _____ D.O.B _____

School Attending _____ Student ID# _____ Grade _____ Room# _____

Service Hours: _____ 7:15am to 8:20am _____ 3pm to 5:45pm _____ AM & PM (3 hours of pm service-Time vary per site)

Weekly Fees & Schedule paid monthly: _____ \$30.00 AM - _____ \$45.00 PM - _____ \$70.00 AM/PM

Fee Category: _____ Private Pay _____ CCIS Co-Pay _____ YALC Scholarship _____ Other

Payments are to be **made monthly on the 15th of the previous month.** Addition Fees: **Late Tuition Fee: \$5.00 per day -Late Pick-up Fee: \$ 1.00 per minute -Early Dismissal Fee: \$5 per each scheduled early dismissal.** Parents wishing to **withdraw** are required to provide a **2-week** written notice to avoid fees.

Payments made by: _____ SY Fee schedule received by _____

Services to Be Provided as Part of Program Fee: Direct supervision of youth Monday thru Friday, Homework assistance/educational enrichment and a daily snack.

Extra Services Provided: We offer your child a safe & fun program blended with academics and multicultural activities such as: arts & crafts, musical and dance skits & performances, indoor/outdoor games, science activities, dramatic play, conflict resolution and group discussions.

Race (please check all that apply): _____ Undeclared _____ Asian _____ Black/African American _____ Amer. Indian Pacific Islander _____ Caucasian _____ Bi-Cultural _____ Latino **Language Spoken:** _____

Household Family Size including yourself: Adults _____ Children _____

Is your child a U.S. citizen or qualifying alien? _____ **Child have an IEP?** _____ CUA Agency _____

Is your child/family receiving: _____ TANF _____ SSI _____ Food Stamps _____ Medicaid _____ None **Case Number:** _____

Person(s) Designated by parent/guardian to whom child may be released:

(1) _____
FULL NAME (printed) Home Address -Zip Code CELL Phone No. When child is in care

(2) _____
FULL NAME (printed) Home Address - Zip Code CELL Phone No. When child is in care

By signing, I agree to comply with all YALC policies contract regulations. I have received **and read all of the information** provided in this contract; the YALC Parent Handbook and Emergency Plan procedure available online at yalcpa.org. (3270.121, 3280.121, 3290.121) I agree to update the emergency contact/parental consent form information whenever changes occur or every 6 months at a minimum. (3270. 124, 3280.124, 3290.124).

I agree to submit a current **CHILD HEALTH REPORT FORM-physical & shot record** dated within 1year **within 2 weeks of admission date.** I understand that without this form or an appointment card, my child may not be allowed to continue services. I allow YALC to provide information and academic feedback if needed to my child's teacher, YALC staff, and other funding organizations such as child care Licensing and any other organizations that sponsor grants/funding and training for quality educational programming. Records will not be released to anyone else without my written consent. YALC will take and display your child's photo and video recording for program purposes only, such as the use of identification, promotional items, observation, YALC website/Facebook & slide shows. If you wish otherwise please submit request in writing. **YALC is Licensed and Insured and is not liable for personal injury or loss of property.**

Parent/Guardian Full Name (Print Full Name) _____ Date _____

Parent/Guardian Signature _____ Date _____

YALC Signature _____ 6 Month Review _____ Date _____

Parent/Guardian Signature _____ Date _____

Related To:

YOUNG ACHIEVERS LEARNING CENTER, INC.

EMERGENCY CONTACT / PARENTAL CONSENT FORM

55 PA CODE CHAPTERS 3270.124(a)(b), 3270.181 & 182; 3280.181 & 182; 3290.124 (a)(b), 3290.181 & 182



Child's Full Name		Childs Home Address – Zip Code		Date of Birth
Mother's Name – Legal Guardian		Guardian Social Security #	Cell Phone	
Home Address – Zip Code				Home Phone
Business Name & Address		E-Mail	Business Phone	
Father's Name – Legal Guardian		Guardian Social Security #	Cell Phone	
Home Address				Home Phone
Business Name & Address		E-Mail	Business Phone	
Name of Emergency Contact Person		Home Phone	Phone No. when child is in care	
Name of Emergency Contact Person		Home Phone	Phone No. when child is in care	
Person To Whom Child may Be Released	Home Address	Zip Code	Phone No. when child is in care	
Person To Whom Child may Be Released	Home Address	Zip Code	Phone No. when child is in care	
Name Of Child's Physician/Medical Care Provider			Phone Number	
Physician Address			Zip Code	
Special Disabilities (if any)		Allergies including medication reaction		
Medical or dietary information necessary in an emergency situation		Medication, special conditions		
Additional information on special needs of child		Behavioral Concerns		
Health Insurance Coverage for Child/Medical Ass. Benefits			Policy No. (required)	

Parent Signature is required next to each item below to indicate parental consent.

Obtaining Emergency Medical Care	Admin. Of minor First-Aid Procedure
Walks And Trips N/A – Permission Slips for trips will be provided	Hand sanitizer
Transportation By the Facility	Swimming /Wading N/A
Signature of parent/guardian	Date
6 month Review	
Signature of parent/guardian	Date

SERVICE PROGRAM INFORMATION

Young Achievers is a license non-profit, community-based, multi-site, non-discriminatory, inclusive year round Before and After School and Summer Day Camp Program. YALC is a non-profit organization that believes children deserve the opportunity to be guided through a learning process while still allowing them to enjoy the pleasures of childhood. As parents and educators we are the facilitators in helping children climb the educational ladder at an early age. Young Achievers Parent Handbook and Emergency Plan can be located at YALCPA.ORG-Print versions available upon request.

OUR MISSION: To provide a nurturing and safe environment with quality education and guidance to youth in our community. **OUR GOAL/OBJECTIVE:** To maintain a safe environment to youth while parents/families are working. To provide a wide variety of multicultural educational activities that promotes cognitive, emotional, and developmental growth in the daily life of a child.

Our Area Of Concentration – Our youth are directly supervised by committed teachers during programming hours. YALC believes that homework is a very important follow-up of a child’s daily learning. YALC staff will facilitate and assist your child with homework assignments. Due to time constraints it is the parent’s and youth’s responsibility to complete all homework assignments.

Parents are responsible for the completion of all homework.

Please notify staff if you would rather have your child do homework at home in writing.

1. YALC LOCATIONS & SITE PHONE NUMBERS:

Main Office: 6409 Argyle St., Phila. PA 19111. **Office Phone & Fax Number** is (215) 698-2347.

Our Chief Executive Officer, (CEO) is Mrs. Gloria Navas-Stuhl (267) 978-6689

Executive Director is Mrs. Ivy Cuervo-Johnson (267) 978-4862

Director of Operations is Mr. Ney Cuervo (267) 647-4501

Site 1: Lowell Elementary 450 West Nedro Ave. Phila.PA 19120 Site Phone (267) 444-3658

Site 2: Creighton Elementary 5401 Tabor Rd. Phila PA 19120 Site Phone (267) 444-3415

Site 3: Carnell Elementary 1100 Devereaux Ave. Phila. PA 19111 Site Phone (267) 444-3861

Site 4: Olney Elementary 5301 N Water St. Phila, PA 19120 Site Phone (267) 663-6806

Site 5: Barton Elementary 4600 Rosehill St. Phila, PA 19120 Site Phone (267) 407-8296

2. YALC SCHEDULE & HOURS OF OPERATION:

Monday thru Friday according to the Philadelphia Public School District Calendar and Universal Creighton We have an “open door” policy. We invite you to drop at any time.

Before School: 7:15am to school admittance

After School: Dismissal to 5:45 pm (times may vary per site) to include scheduled early dismissal days. Your child will receive snack daily. *Be sure to list all food allergies on Emergency Contact*

3. YALC ADMISSION AND ENROLLMENT REGULATIONS-

School-aged children and youth that attend a school in the area are eligible to participate. Applications for enrollment are accepted without regard to race, religion, color, sex, or national origin.

4. REQUIRED ENROLLMENT FORMS

- A completed and signed school year contract and consent forms included and not limited to social security numbers, medical policy number, etc.
- Emergency Contact Form - gives us important information about who to contact in the event of an emergency.
- Child Health Report Form - Provides information regarding your child’s medical background and any special health needs.

5. YALC ARRIVAL AND DISMISSAL PROCEDURES

Security-For or security purposes, you must walk your child in and **sign your child out daily** and be prepared to show ID. Your child will not be released to any minor or persons without ID and authorization by parent/guardian.

6. ATTENDANCE-

If your child will be **absent** from school for either a single day or an extended period or taken out of school during the day for medical, legal, or personal reasons you **MUST** contact the office at 215-698-2347 between 9am and 2pm.

7. **LATE PICK-UP-** If delayed for any reason; Call your child's after school site phone **immediately** to avoid making any unnecessary emergency contact calls including the local police station. There will be a \$1.00 dollar per minute late fee. This fee will be paid in cash to the staff in charge immediately the same day. Habitual late pick-ups may result in your child's termination.
8. **PICTURES/MEDIA/VIDEO DISPLAY-** YALC will take and display your child's photo and video recording for program purposes only, such as the use of identification, promotional items, observation, YALC website/Facebook & slide shows. If you wish otherwise please submit request in writing.
9. **DISCIPLINARY POLICY-** No child shall be subject to any form of corporal, emotional punishment, or neglect, abusive language, ridicule or any behavior that shall intimidate, frighten or endanger a child and their self-image. If unacceptable behavior continues: **1.** Verbal communication of behavior will be made between child and parent(s) **2.** Written report will follow **3.** Termination of services will result if behavior does not improve. Parent/Guardian will still be responsible for any unpaid tuition fees.
10. **REGISTRATION FEES- \$30 non-refundable fee for Academic school year.** Such fees are necessary to confirm and hold your child's space in our program. If you remove your child from the program and then wish to return, you must pay a re-registration fee. Your child will only be admitted if space is available.
11. **FEES-** Covers direct on site supervision to youth Monday thru Friday. Homework assistance and educational enrichment activities along with a daily snack. Fees are subject to change. Fees exclude enhancement to the existing program including outdoor trips, transportation, and other administrative program costs. An additional \$5 fee will be charged per child for each scheduled early dismissal.
12. **FEES POLICY-** Parent/Guardian(s), it is your responsibility to re-enroll & pay monthly. Fees are calculated on a weekly basis however services are paid monthly. Payments must be made by the 15th of the previous month for current enrolled students wishing to continue services for the following month. Acceptable forms of payment are **Major Credit Cards** or **Money Orders**. A late fee of \$5.00 per day will be charged for each day that payment is received after the 15th of the month. Credit transactions are subject to a decline fee of up to \$30. **If tuition and fees are unpaid your child will not be admitted until full payment is made.** Please note that YALC is sensitive to unexpected financial hardships, see administration for **subsidy information**.
13. **REFUND & CREDIT-** Refunds will not be given for missed days, school closings/holidays or in the event of emergency closings mandated by the school district due to weather or other circumstances. There are no exceptions. Partial credit may be given upon a doctor's note for the days missed.
14. **WITHDRAWALS-** Parents may withdrawal from the program any time; *a two-week written notice is required*. Parents wishing to withdraw their child, but fail to provide a written notice will still be liable for the last 2 weeks of tuition as well as losing any deposit made. Any time a child is dropped from the program a re-enrollment fee of \$10 must be paid.
15. **SOCIAL SECURITY NUMBERS-** YALC is a non- profit organization and contractually requires social security numbers as part of your child's enrollment. YALC is also required to maintain social security numbers for subsidized funding, identity verification and tax purposes.
16. **COLLECTIONS-** Any account that goes past due will be sent to collections and be reported to the Credit Bureau. Tax Identification number will not be provided to accounts past due. Any additional collection fees will apply to your account.
17. **CCIS FAMILIES-** Young Achievers welcomes outside agencies to help pay for childcare cost. If at any point you begin receiving payments for childcare through a grant or subsidy program, and if at any point the agency will no longer pay for childcare you will then be responsible to pay for all fees. If you decide to render services with Young Achievers you must do so in writing 2 weeks prior to avoid accruing fees. CCIS does not pay registration fees, early dismissal fees and any late fees associated with your childcare.
18. **CHILD HEALTH REPORT-** Is to be submitted within 2 weeks of admission date. If you need to schedule a doctor's appointment you must provide an appointment card to avoid late fees. Without this form or an appointment card, my child may not be allowed to continue services.