

CHARLOTTE-MECKLENBURG SCHOOLS AFTER SCHOOL ENRICHMENT PROGRAM
SPRING BREAK SITE REGISTRATION FORM

Please complete one form per child

"Relays Recess for Healthy Living"

Central Office Registration Period February 14th---April 1st

From April 4th-8th registration at the break site will be accepted on a space available basis.

Registration will not be accepted at the break site once staffing capacity is met.

ELEMENTARY SITE CHOICES. Please check your site preference

- Billingsville, 124 Skyland Avenue Charlotte, NC 28205 (980)343-5520
- Elon Park, 11425 Ardrey Kell Road Charlotte, NC 28277 (980)343-1440
- Elizabeth Traditional, 1601 Park Drive Charlotte, NC 28204 (980)343-5475
- Grand Oak, 15410 Stumptown Road Huntersville, NC 28078 (980)343-2063
- Highland Creek, 7242 Highland Crk. Parkway Charlotte, NC 28269 (980)343-1065
- Highland Mill, 3201 Clemson Avenue Charlotte, NC 28205 (980)343-5525
- Idlewild, 7101 Idlewild Road Charlotte, NC 28212 (980)343-6411
- Steele Creek, 4100 Gallant Lane Charlotte, NC 28273 (980)343-3810

***CCRI, McKinney Vento,
and DSS families must
submit registration to ASEP
Central Office by
April 1st in order to attend
Spring Break ***



CHECK THE DATE(S) YOUR CHILD WILL ATTEND:

- April 11 April 12 April 13 April 14 (ASEP closes early @ 2pm April 14th)

Please remember to pack a healthy lunch for your child each day

HOW TO REGISTER

1. Complete **ALL** the information below and on the back of this page. Please sign and date at the end.
2. Attach your **online payment receipt** to the registration form for full payment for the number of days your child will attend.

To pay online using Easy Draft use the payment drop down box, select break fees and pay based on the number of days your child is registered to attend.

Cost for Break site care is \$25.00 per day per child. Registration fee of \$47 is due if child is **not** currently enrolled in CMS-ASEP. **Only online payments will be accepted.**

Paid Online AMOUNT: \$ _____ Child's Home School _____

Check here if your child attends through CCRI -or- McKinney Vento -or- DSS
Break fees for CCRI will be handled at the Break ASEP site, if applicable.

3. Send the registration and receipt to: **ASEP CENTRAL OFFICE
1901 Herbert Spaugh Lane
Charlotte, NC 28208**
4. A confirmation packet will be sent upon registering. Questions? Call the ASEP office, 980 343-5567.

NO REFUNDS OR CREDITS AFTER April 1st Registrations & Break fees are nontransferable

STUDENT INFORMATION

CHILD'S NAME _____
(Last) (First) (Middle) (Grade)

ADDRESS _____ Zip _____ Current ASEP Site _____

PARENT/GUARDIAN INFORMATION:

1. Name _____ Home Phone _____
Address _____ Cell Phone _____
Place of Employment _____ Work Phone _____
2. Name _____ Home Phone _____
Address _____ Cell Phone _____
Place of Employment _____ Work Phone _____

NAMES AND DAYTIME PHONE NUMBERS OF PERSONS (AGE 16 OR OLDER) AUTHORIZED TO PICK UP CHILD OTHER THAN PARENTS/GUARDIANS

1. NAME _____ PHONE _____

2. NAME _____ PHONE _____

INFORMATION ABOUT YOUR CHILD (allergies, restrictions, special needs, *or NA-not applicable*) This info does not exclude your child from the program.

EMERGENCY CARE INFORMATION:

CHILD'S DOCTOR'S NAME _____ PHONE _____

DOCTOR'S ADDRESS _____ HOSPITAL PREFERENCE _____
Actual hospital name required

IF PARENT/GUARDIAN CANNOT BE REACHED, CALL:

NAME _____ PHONE _____ RELATIONSHIP _____

I agree that the Site Coordinator may authorize the physician of her/his choice to provide emergency care in the event that neither the family physician nor I can be contacted immediately.

Parent/Guardian Signature **X** _____ Date ____/____/____

INSURANCE

Insurance is required for each child who attends the After School Enrichment Program during Spring Break. Please check the appropriate space below. **Please include the policy name and number for personal insurance coverage.**

My child has school insurance.

My child is covered by my personal insurance policy

Insurance Company Name

Insurance Company Policy Number

BREAK SITE DISCIPLINE AND BEHAVIOR MANAGEMENT POLICY

Disruptive behavior in the After School Enrichment Program makes it difficult to provide appropriate supervision. Any student who repeatedly disobeys the rules will be referred to the Site Coordinator.

In the event of an incident involving an assault, a weapon, alcohol, or an illegal substance, the Principal and the Site Coordinator may choose to revert to the CMS Students Rights and Responsibilities Handbook consequences guidelines if necessary to assure a safe and orderly environment for all children.

We do NOT:	We DO:
Spank, bite, pinch, punch, pull, slap, or otherwise physically punish children. Yell at, threaten, make sarcastic remarks about, use profanity, or otherwise verbally abuse children. Deny food or rest as punishment. Place children in locked rooms, closets, or boxes as punishment. Allow discipline of children by children. Criticize, make fun of, or otherwise belittle children, their parents, families, or ethnic groups. Shame or punish children when bathroom accidents occur.	Praise, reward, and encourage children. Reason with children and set limits. Listen to children. Model appropriate behavior. Modify the classroom environment to attempt to prevent problems before they occur. Treat children as people and respect their needs, desires and feelings. Explain things on their level. Provide alternatives for inappropriate behavior. Provide children with natural and logical consequences of their behavior. Stay consistent in our behavior management.

I the undersigned parent/guardian of (Child's Name) _____, do hereby state that I have read and received a copy of the *ASEP Break Site Discipline and Behavior Management Policy, the ASEP Family Guidelines (ASEP web site), Summary of Day Care Laws*, and that I have had the opportunity to discuss any questions regarding the Policy with a staff member.

X _____
Parent/Guardian Signature Date