



Simsbury Enrichment and Extended Day

Kelly Curtis, Program Coordinator

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Dear Parents/Guardians:

Thank you for your interest in the SEED Program! We are so excited to begin planning for the tenth year of our program. SEED is committed to providing quality after school care for Simsbury's elementary children.

Attached you will find the forms necessary to register your child(ren) for the 2018-2019 school year, as well as a listing of the fees. Please be sure to fill out a separate form for **EACH** child. A \$100 deposit per child (checks only; no cash) must be included with the form(s). This deposit will go towards the first month's tuition. *Your child's registration will not be processed until all forms and payment are completed and received.* You will receive a confirmation phone call regarding your child's enrollment in the SEED Program. Additionally, an updated Parent Handbook, including any policy and/or procedure changes will be mailed to all registered families over the summer.

As a reminder, separate registration forms must be completed for snow days and vacation days/weeks. *Registration packets for these days will be available in September 2018.* For any questions regarding vacation/snow day programs, please contact the SEED office at 860-408-6144.

If you have any questions regarding registration, or need additional information about the SEED Program, please do not hesitate to contact me. I, along with the SEED staff, look forward to working with you and your family this year!

Sincerely,
Kelly Curtis
SEED Program Coordinator

Our SEED Character Traits are:

Respect, Responsibility and Kindness

REGISTRATION FORM
2018-2019 School Year
CHILD/FAMILY INFORMATION

Please print clearly and complete all information requested



| |
|---|
| OFFICE USE ONLY |
| ALLERGIES: Yes _____ No _____ |

PLEASE COMPLETE ONE FORM PER CHILD ONLY!

Child's Name _____ Gender (M/F) _____ DOB _____ / _____ / _____ Age _____

Address _____ Town _____ State _____ Zip _____

Home Phone (____) _____ - _____ School Child Attends _____ Grade in September 2018 _____

In case of emergency, which parent/guardian listed below should be contacted first? _____

Parent/Guardian Name _____
Relationship to Child _____
Address (if different) _____
Town _____ State _____ Zip _____
Home Phone (____) _____ - _____
Cell Phone (____) _____ - _____ Work Phone (____) _____ - _____
Email Address _____
Place of work _____
Business Address _____

Parent/Guardian Name _____
Relationship to Child _____
Address (if different) _____
Town _____ State _____ Zip _____
Home Phone (____) _____ - _____
Cell Phone (____) _____ - _____ Work Phone (____) _____ - _____
Email Address _____
Place of work _____
Business Address _____

Unless informed otherwise, SEED assumes both parents listed above may pick up the child. If a parent may not pick up the child, legal documentation of that fact is required.

****NOTE: YOU MUST LIST AT LEAST ONE EMERGENCY AND PICKUP AUTHORIZATION CONTACT OTHER THAN A PARENT OR GUARDIAN.***

EMERGENCY CONTACT INFORMATION (includes routine pick up authorization)

In case of emergency, if the SEED staff are unable to reach the parent/guardian listed above, the following individual(s) have permission to make decisions regarding the care of my child, including permission to pick up my child in case of an emergency or dismissal.

Name _____ Relationship to Child _____
Home Phone (____) _____ - _____ Work Phone (____) _____ - _____ Cell Phone (____) _____ - _____

Name _____ Relationship to Child _____
Home Phone (____) _____ - _____ Work Phone (____) _____ - _____ Cell Phone (____) _____ - _____

PICKUP AUTHORIZATION

I give permission for my child to be released from the SEED Program to the people listed below. I understand staff require these people to provide photo identification before releasing my child.

Name _____ Relationship to Child _____
Home Phone (____) _____ - _____ Work Phone (____) _____ - _____ Cell Phone (____) _____ - _____

Name _____ Relationship to Child _____
Home Phone (____) _____ - _____ Work Phone (____) _____ - _____ Cell Phone (____) _____ - _____

Child's First and Last Name: _____

REGISTRATION FORM

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Please print clearly and complete all information requested

PROGRAM DESIRED

Please circle your desired location, attendance, days attending and type of care you would like to register for:

| Program Location | Program Attendance | Days Attending | Type of Care |
|------------------|--------------------|----------------|----------------|
| SQUADRON | 1 DAY | MONDAY | AM AND PM CARE |
| LATIMER | 2 DAYS | TUESDAY | AM CARE ONLY |
| TOOTIN | 3 DAYS | WEDNESDAY | PM CARE ONLY |
| TARIFFVILLE | 4 DAYS | THURSDAY | |
| CENTRAL | 5 DAYS | FRIDAY | |

Once registered, children may **not** switch attendance days on a weekly basis. In the event you need a permanent change, please fill out a program change form (available in the SEED office or on the webpage).

START DATE: _____

- **All programs must have a minimum enrollment of 10 students each day.**
- Please include a \$100 enrollment deposit fee, which is applied to the first month tuition.
- Any modification to a child's program requires completion of a SEED Change Form.
- Monthly tuition is due by the 15th of each month.
- Please mail check to SEED main office. Checks payable to SEED.
- If dropping off payment at Squadron, check **MUST** go directly in payment box in **CAFETERIA** or in **MAIN OFFICE**. Payments **MAY NOT** be given to **SEED STAFF MEMBERS!**

MEDICAL INFORMATION

Highly allergic to (bee stings, peanuts/tree nuts, any medications etc..)_____

Diabetic Seizure Disorder

Other health/medical concerns: _____

Taking any medication(s) (please list the names and dose)

In compliance with the Connecticut State Law and Regulations and Simsbury Public Schools Policy, SEED requires all medications (including over the counter) to have written parent AND physician authorization to administer medication at SEED. Please notify the SEED main office of any change in the above information. Medication must be delivered to the SEED program in the original pharmacy labeled container by a parent or responsible adult. Please note, SEED will only administer medications for serious medical conditions.

I give my permission for you to provide immediate First Aid and to take whatever action you deem necessary for the health and welfare of my child in case of emergency, including contacting emergency services and the need for medical transportation. I also give permission to post my child's name (first name and last initial only) and/or photo to the SEED website or other SEED related material.

PARENT/GUARDIAN SIGNATURE

PARENT/GUARDIAN PRINTED NAME

DATE

SEED TUITION FEES

2018 – 2019 SCHOOL YEAR



AM Care Monthly Tuition (7AM until school starts)

Squadron Line Only

| | |
|---------------|-----------------|
| 5 days a week | \$180 per month |
| 4 days a week | \$145 per month |
| 3 days a week | \$110 per month |
| 2 days a week | \$75 per month |
| 1 day a week | \$40 per month |

PM Care Monthly Tuition (After school until 6PM)

Squadron Line, Latimer Lane, Tootin Hills, Tariffville and Central Schools

| | |
|---------------|-----------------|
| 5 days a week | \$355 per month |
| 4 days a week | \$285 per month |
| 3 days a week | \$215 per month |
| 2 days a week | \$145 per month |
| 1 day a week | \$ 75 per month |

ADDITIONAL CARE (with prior approval, when available)

Squadron Line, Latimer Lane, Tootin Hills, Tariffville and Central Schools

| | | |
|---------------|-----------------|--------------|
| 1 Day AM Care | (SQUADRON ONLY) | \$20 per day |
| 1 Day PM Care | | \$25 per day |

MISC. FEES AND DISCOUNTS

Squadron Line, Latimer Lane, Tootin Hills, Tariffville, and Central Schools

| | |
|------------------|----------------------|
| Returned Check | \$25 per check |
| Late Fee | \$30 per month late |
| Sibling Discount | 5% off lower tuition |



Frequently Asked Questions

Q. What is SEED?

A. The SEED program stands for “Simsbury Enrichment and Extended Day.” SEED provides a fun, safe, educational and enriching environment for every child. Warm and friendly staff nurture children to increase their cognitive abilities and foster self-esteem, while developing team spirit with a sense of cooperation and fair play. SEED strives to create a seamless continuum of support and education for Simsbury elementary students.

SEED offers before school care (Squadron Line Only) and after school care. This includes late openings (when registered for AM care) and early dismissals (when registered for PM care).

Q. What will my child’s day be like at SEED?

A. At SEED, children will enjoy time to socialize, do homework, have snack and engage in a variety of enrichment activities including active play.

Q. Can I change my child’s SEED schedule?

A. Yes. Changes can only be made on a monthly basis. Please note changes to your child’s schedule may not be made from one week to the next and days may not be switched (i.e. due to illness, other absence, change in activity schedules, etc.) All program changes require a notice of 24 hours and a two week notice is required for withdrawing from the program. No changes will be considered from the first day of school through September 15th. Confirmation is required from the SEED office for any change to take effect.

Q. What enrichment opportunities will be offered with the SEED program?

A. The SEED program provides additional enrichment activities to our daily schedule such as math, literacy, science, arts and more! When enrolled in the SEED program, all PM care participants will also have the opportunity to participate in our Global Arts, Music and Dancing as well as Fit4Fun program for no additional cost. These programs meet once a week at each after school site for one hour throughout the school year.

Q. Where can my child attend SEED?

A. SEED is offered at Latimer Lane, Tootin Hills, Tariffville School, Central School as well as Squadron Line. AM program is offered at Squadron Line School only.

Q. What are the hours of operation for SEED?

A. AM care is at Squadron Line only and opens at 7:00am until the opening of school (including late openings). PM care opens at school dismissal (including early closings) and is open until 6:00pm.

Q. Does SEED offer any financial aid or discounts?

A. A sibling discount of 5% off the lower tuition is offered to families with more than one child enrolled in the program. Additional financial aid through the SEED Program is available for those who qualify. Please contact the SEED Office for more information at 860.408.6144.

Q. Will SEED offer vacation days and snow day coverage?

A. Yes, SEED will offer vacation days and snow day coverage. A separate snow and vacation day registration form is required for participation in any vacation day or snow days throughout the school year. The forms will be available in September. There is a cost of \$45 per child per day for all snow and vacation days. Sibling discount and financial aid applies to snow and vacation days for those who qualify.

Q. Is the program eligible for federal child care tax credit?

A. Yes, but check with your tax advisor.