

**COBB COUNTY SCHOOL DISTRICT
AFTER SCHOOL PROGRAM RULES
School Year August, 20____ to May, 20____**

Student's ID Number

Student's Name

Grade

School

Dear Parent/ Guardian, Welcome to our **After School Program!** The After School Program (ASP) provides a safe, fun, and nurturing environment for the care of elementary students from after school until 6:00 PM on each school day. ASP is a self supporting program. Participation should be considered a privilege. **By completion of this form, I understand that I am registering my student in ASP.**

1. Every student attending the After School Program (ASP) must have a current ASP Registration Form on file at our school. I understand that it is my responsibility to inform the school of any changes of the information, particularly phone numbers and emergency contacts, on the ASP Registration Form.

Initials _____ / Date _____

TUITION, ATTENDANCE, OPERATING HOURS and PAYMENTS

2. I am enrolling my student in the tuition **PREPAID** After School Program. I agree to pay a non-refundable annual registration fee of **\$10** per student. (The registration fee is transferable between Cobb County elementary schools.) I agree to prepay **\$7** per day per student. **If my student's account becomes past due, my student may not attend the program, and I must make other arrangements for after school care.**

Initials _____ / Date _____

3. **Payment must be made prior to attendance.** Enclose all ASP payments, cash or checks, in the ASP payment envelope and drop the payment in the school's safe or drop box. ASP checks must be made payable to the school. Do not include other school money, such as lunch, PTA or field trips. **Change will not be given.** All money will be credited to the student's ASP account.
4. If a check is returned unpaid from the bank, the check will be charged back to your student's account. If the account becomes delinquent, you will have three days from the date notified by the school to bring the account current. Failure to pay within this time may result in the student being removed from the After School Program. After two returned checks, only cash or money orders will be accepted for the remainder of the school year.
5. The hours of the program are from the time school ends until 6:00 PM on the days that school is in session. Attendance will be taken immediately after school dismissal and the student's account will be charged.
6. **A LATE FEE** of \$1.00 per minute per student will be charged for every minute past 6:00 PM according to the school clock. **YOUR STUDENT MAY BE WITHDRAWN FROM THE PROGRAM AFTER THE THIRD LATE PICK UP.**
7. All ASP refunds must be requested in writing. The request must be received no later than Monday of the last week of the school year.
8. Monthly or Summary Student ASP Account Statements are available by request.

BEHAVIOR EXPECTATIONS & DISMISSAL PROCEDURES

9. The same behavior expectations apply in ASP as during the regular school day. All Cobb County School District policies in the student handbook apply to ASP. Inappropriate behavior may result in your student's suspension or withdrawal from the program.
10. To ensure the safety and security of all students in ASP, if an emergency occurs that threatens the welfare of a student, a school official will contact the Cobb County Police Department. Late pick-up from ASP may be considered such an emergency.
11. If school closes for inclement weather or any other reason, ASP will close, also. In this case, the instructions given to your student's homeroom teacher on the inclement weather form will be followed.
12. For the protection of your student, only people designated on the registration form will be allowed to pick up your student. **IDENTIFICATION WILL BE REQUIRED.** Each student must be signed out at the ASP desk every day.
13. **Students may be suspended or withdrawn from the After School Program for the following reasons:**

a. **Three Late
Pick-ups**

b. **Nonpayment or Late
Payment of Tuition &
Fees**

c. **Discipline
Problems**

d. **Principal's
discretion**

I am registering my student in the After School Program. I have read, understand, and will comply with the rules outlined above.

Parent/Guardian Signature

Date