

Tewksbury Public Schools
Office of Community Services Announces

**EXTENDED DAY KINDERGARTEN
PARENT INFORMATION NIGHT**

Date: Thursday, February 5, 2009

Time: 6:30 PM

Location: Dewing School Cafeteria, 1469 Andover Street

Tewksbury Public Schools will continue to offer a two and one half day **Extended Day Kindergarten Program** for the upcoming 2009-2010 school year. This program will operate at the Dewing, Heath Brook, North Street, and Trahan Schools. The **Extended Day Kindergarten** schedule will mirror your child's public kindergarten schedule to provide a full day, 5 day total kindergarten experience.

Curriculum

The program offers a child-centered curriculum, based on the Massachusetts Curriculum Frameworks. Daily activities include language arts, math readiness, art, music, physical education, and structured activities for social development. Extended Kindergarten students also have the opportunity to participate in the Waterford Early Reading Program. All teachers have Massachusetts' teacher licensure.

Lunch

A lunch will be served. The daily menu is from the Tewksbury Public Schools Elementary Food Service menu. The cost of lunch and a light snack is included in the tuition rate on the days your child attends Extended Kindergarten.

Transportation

Students will be transported to and from school by the school department at no additional charge for those students who attend during regular school hours.

Tuition

The **Extended Day Kindergarten Program** follows the Tewksbury Public Schools' calendar. The cost of this program is \$80.00 per week. A two-week tuition payment, in the amount of \$160.00, must be submitted at the time of registration. Checks should be made payable to the "Town of Tewksbury". **Cash will not be accepted.** Unless otherwise noted, tuition is due and payable in full when Tewksbury Public Schools are in session and must be submitted to your child's **Extended Day Kindergarten** teacher every other Friday for the upcoming two weeks. **Tuition rates are subject to change.**

Additional Information

- ◆ *Children are enrolled on a first come, first served basis.*
- ◆ *Students attending the **Before School Program** and the **After School Program** must be transported by parents/guardians.*
- ◆ *Start and end times are approximate and will coincide with the public school day schedule.*
- ◆ *On Mondays, students are escorted between the **Extended Day Kindergarten** class and the public Kindergarten class within each school.*
- ◆ *Due to transportation issues, if you withdraw your child from the **Extended Day Kindergarten Program**, your child may be required to switch public kindergarten sessions.*

Please mail forms (Registration, Consent and Release, and Accidental Illness) and payment to:

Community Services
320 Pleasant Street
Tewksbury, MA 01876
(978) 640-7831

or

*Bring your forms with you to
the parent orientation on
February 5th.*

OTHER EXTENDED DAY PROGRAMS

In addition to our Extended Kindergarten Program, we offer other programs for children in our school system. If you choose the Extended Day Kindergarten Program, you may also enroll your child in either the Before School Program and/or the After School Program.

EXTENDED KINDERGARTEN PROGRAM HALF-DAY MONDAY ONLY

The Half-Day Monday Only Program may be offered in late August, on a space availability basis. Check with the Community Services Office (978-640-7831) for more information.

THE BEFORE SCHOOL PROGRAM (Kindergarten through Fourth Grade)

The **Before School Program** will start two hours before the regular school day at the Dewing, Heath Brook, North Street, and Trahan schools. The morning schedule will provide a nurturing environment and a positive start to the day.

- **BEFORE SCHOOL ARRIVAL:** Parents/guardians must walk child(ren) into the school each morning that they attend the program and must sign-in upon arrival.
- **SNACK:** A mid-morning snack will be provided by Tewksbury Public Schools Elementary Food Services.
- ****TUITION:** Dewing, Heath Brook, North St., Trahan Schools

FIVE DAY PROGRAM	*THREE DAY PROGRAM
\$35.00/Week	\$27.00/Week

A two-week tuition deposit must be submitted with your registration; thereafter the two-week payment must be submitted to the site director every-other Friday.

***MUST BE THE SAME THREE DAYS EACH WEEK.**

****TUITION RATES ARE SUBJECT TO CHANGE.**

THE AFTER SCHOOL PROGRAM (Kindergarten through Fourth Grade)

The **After School Program** will run for three hours at the conclusion of the regular school day. The daily schedule will balance structured time and free choice. Homework assistance, computer application, and supervised outside play will be integral parts of the **After School Program**.

- **AFTER SCHOOL DISMISSAL:** Parents/guardians must sign-out their child(ren) each afternoon they attend the program.
- **SNACK:** An afternoon snack will be provided by Tewksbury Public Schools Elementary Food Services.
- ****TUITION:** Dewing, Heath Brook, North St., Trahan Schools

FIVE DAY PROGRAM	*THREE DAY PROGRAM
\$60.00/Week	\$44.00/Week

A two-week tuition deposit must be submitted with your registration; thereafter the two-week payment must be submitted to the site director every-other Friday.

***MUST BE THE SAME THREE DAYS EACH WEEK.**

****TUITION RATES ARE SUBJECT TO CHANGE.**

TEWKSBURY PUBLIC SCHOOLS

EXTENDED DAY PROGRAMS

ACCIDENT-ILLNESS FORM

TO PARENTS/GUARDIANS OF EXTENDED DAY CHILDREN:

In case of accident, illness or other emergency, the Extended Day staff must be able to locate parents/guardians or some other person who will care for your child. For these reasons, we must have on file the names and phone numbers of two other persons who may be called to take care of your child if the parents/guardians cannot be reached. Please supply the information requested below and return this report to our office with your registration form. Thank you for your cooperation.

Student's Name _____ Date of Birth _____ Current Grade _____

Last First Initial _____

Home Address _____ Tewksbury, MA 01876 Home Phone () _____

Parent/Guardian (#1): _____ Parent/Guardian (#2): _____

Cell (#1): () _____ Cell (#2): () _____

Parent/Guardian (#1) Place of Business _____ Business Phone () _____

Parent/Guardian (#2) Place of Business _____ Business Phone () _____

Names of **two persons** who may be called to take care of (and/or pick up) your child in absence of the parent/guardian. These people, if not known by the staff, must provide appropriate identification.

Name _____ Address _____

Home Phone () _____ Cell Phone () _____ Business Phone () _____

Name _____ Address _____

Home Phone () _____ Cell Phone () _____ Business Phone () _____

In case we cannot get in touch with you and your child needs emergency medical attention, do you authorize this at your expense?

YES _____ NO _____ If your answer is no, please describe an alternative action plan.

Name of Doctor: _____ Address _____ Phone () _____

Name of Dentist: _____ Address _____ Phone () _____

Name of Insurance Company: _____ Policy #: _____

Note: In case of an emergency, the Tewksbury Fire Department will be called and your child will be transported to the

NEAREST HOSPITAL at the discretion of the ambulance service.

If we cannot reach your doctor, may we call one available? YES _____ NO _____ If your answer is no, please describe an alternative action plan. _____

Does your child have any illnesses, diseases, accidents, allergies, or other chronic health problems? YES _____ NO _____

IF YES, PLEASE LIST.

Are there any medications that need to be or may need to be administered during program hours? YES _____ NO _____

If the answer is "yes", you must come to the site to administer these medications. _____

Signed _____
(PARENT OR GUARDIAN) (DATE)

***IT IS THE PARENT'S/GUARDIAN'S RESPONSIBILITY TO NOTIFY
THE
STAFF IF ANY OF THE ABOVE PHONE NUMBERS OR
INFORMATION SHOULD CHANGE.***

**TOWN OF TEWKSBURY
TEWKSBURY PUBLIC SCHOOLS
CONSENT AND RELEASE FORM
PARTICIPATION IN VOLUNTARY, CO-CURRICULAR AND ATHLETIC ACTIVITIES
2009-2010 SCHOOL YEAR**

I/We, the undersigned _____
Name(s) of parent(s) or guardian(s)—insert legal relationship to student, e.g. "parent(s)", guardian(s)

of _____, my/our child a minor, do hereby consent to my/our child's participation in voluntary athletic, recreation or extra-curricular programs ("Programs") of the Town or Public Schools of Tewksbury.

I/We represent and warrant that I/we am/are the parent(s) or guardian(s) of said child with authority to so consent and to sign this Consent and Release Form (the "Form").

I/We agree to forever release the Town or Public Schools of Tewksbury and all their employees, agents, board members, volunteers, and any and all individuals or organizations (the "Releasees") assisting or participating in said Programs of the Releasees from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to my/our child or property damage resulting from my/our child's participation in said Programs.

I/We also agree to indemnify, defend, and hold harmless the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my/our child or property damage resulting from my/our child's participation in said Programs.

I/We understand that my/our child's participation in said Programs is voluntary and that my/our child and I/we am/are free to choose not to participate in said Programs. By signing this Form, I/we affirm that I/we have decided to allow my/our child to participate in said Programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage my/our child or I/we may suffer as a result of participating in said Programs.

I/We further affirm that I/we have read this Form with care and that I/we understand the contents of this Form. I/We understand and acknowledge that this Form is a legal instrument, which may affect my/our legal or my/our child's legal rights, and that I/we was/were afforded the opportunity to have this Form reviewed by legal counsel of my/our choice before signing this Form.

I/We acknowledge that this Form is a legal instrument, which may affect legal rights, and that parents or guardians are afforded the opportunity to have the Form reviewed by legal counsel prior to signing.

I/We sign this form voluntarily and freely without duress. I/We further acknowledge that the Releasees have made no representation of fact or opinion to me/us, which in any manner has induced me/us to agree to sign this Form.

Witness To Signatures:

Signed:

Date _____

Parent(s) or Guardian(s) of:
