



WELCOME!

We are excited to have your child/children join us for Coalition For Kids Summer Program. We look forward to 8 weeks of fun, sun, and friendships! Here are a few reminders:

- Our Summer Program will run Monday, June 4th –Friday, July 27th
- We **open promptly at 7:30am** and **close promptly at 5:30pm**. **Sorry, no early arrivers or late pick-ups allowed!**
- Late pick-up fee is \$1 per minute per child enrolled
- Children must arrive by 8:30am-no late arrivals allowed!
- We are still finalizing our fun filled calendar! You will receive a copy on opening day.
- No special clothing will be needed on opening day- comfy is your best choice.
- If you requested bus transportation and have not heard from a Coalition Employee regarding pick-up times and locations by Friday, April 17th- please contact Jordan Spain at 434-2031 ext. 819
- We will be CLOSED Wednesday, July 4th in observance of Independence Day
- Fees are due every Monday afternoon, regardless of your child's attendance.
 - Special arrangements can only be made in cases of emergency or extreme circumstances.
 - Please pay your fees on time so that your child will be able to participate in all of the fun activities!
- We will do a Summer School pick-up at Fairmont Elementary and Indian Trail **every day except for Wednesdays**.
- If your child will require any medications or if they have a food allergy, please make sure the appropriate paper work is filled out by their physician and returned to Coalition before opening day. This includes inhalers, epi pens, and any medications needed whether prescribed or over the counter.

If you have any questions or concerns, please feel free to call contact us at 434-2031 Ext. 820.

Sincerely,

Coalition For Kids



Coalition For Kids, Inc. Parent Partnership Agreement

The Coalition For Kids, Inc. recognizes the need and the importance of parent involvement in the educational success of their students. We wish to welcome you to the Coalition Family. Like all supportive families we appreciate your vote of confidence that we can all work together for the positive growth of your child.

Below you will find 3 key areas in which we ask for your participation. **Please check off those items to which you can / will commit.**

Things I will do at home with my child:

- Ask my child about their day at Coalition.
- Give my child some positive feedback each day.
- Help my child go to bed on time.
- Ensure my child attends Coalition at least 3 days per week.
- Speak positively about Coalition.
- Talk about the importance of education.

Things I will do with the Coalition For Kids:

- Support the Coalition in its efforts to maintain proper discipline.
- Communicate with Coalition staff about my child's progress.
- Read and respond to notes the Coalition sends home.
- Communicate all special needs of my child.

Things Coalition will do with my child:

- Promote the goals and interests of each child.
- Make learning safe and enjoyable.
- Provide programs to help the child grow with Christian values.
- Establish high expectations and hold children accountable.
- Provide the highest quality staff that can support the growth, development and learning of children.
- Communicate with parents in a timely fashion.

Parent/Guardian Signature

Coalition Staff Signature



Coalition For Kids Daily Transportation Plan

Child's Name: _____ Grade Entering: 1 2 3 4 5 6 7 8 9

___ will be a **Parent Drop Off** at ___ Kid City

___ Everyday ___ The Following Days ___ M ___ T ___ W ___ TH ___ F

___ will be a **Parent Pick Up** at ___ Kid City

___ Everyday ___ The Following Days ___ M ___ T ___ W ___ TH ___ F

___ will be a **Morning Bus Rider**

___ Keystone ___ Gibson Ridge ___ The Rock

___ Everyday ___ The Following Days ___ M ___ T ___ W ___ TH ___ F

___ will be an **Afternoon Bus Rider**

___ Keystone ___ Gibson Ridge ___ The Rock

___ Everyday ___ The Following Days: ___ M ___ T ___ W ___ TH ___ F

Attending Summer School: ___ Yes ___ No ___ Unsure

Coalition For Kids will follow each child's daily transportation plan. If you wish to change your child's transportation plan or in case of an emergency, you must notify Coalition For Kids in writing or by speaking to someone at the Front Desk at 423-434-2031 Ext. 820 no later than 3p.m. Children will not be allowed to change their daily transportation plan without written permission from their parent/guardian.

Your child's transportation plan cannot be changed on a day by day basis or be told to the bus driver/monitor. If you change this plan more than 3 times you will lose bus privileges for the rest of the summer.

Parent/Guardian Signature: _____ Date: _____



Summer Parent Drop Off/Pick-Up Policy

Parent Drop Off:

- Kid City opens at **7:30am** and participants must arrive at the center by **8:30am**. Limited exceptions can only be made in case of doctor appointments. Late arrival must be approved by your child's Team Director at least 24hrs in advance. Please have alternate childcare arrangements available in case of oversleeping, car trouble etc. One warning will be given for a late drop off. _____ (parent initial)

Parent Pick-Up:

- Parent pick-up begins at **4:00pm** and ends at **5:30pm**. Due to the active nature of programming, participants are **not available** for an earlier pick-up. If you need to pick-up your child early due to an appointment (Doctor, Dentist, etc.) arrangements will need to be made with the Team Director ahead of time. If an arrangement cannot be worked out due to a field trip or other programming activities an alternate plan will need to be made for the child that day. _____ (parent initial)

Bus Pick-Up/Drop-Off:

Bus routes are designed based on majority location and need of our students. Once a route is established within the first 2 weeks of programming a set time will be given to expect the pick-up and drop-off.

- All pick-ups will range between **7:45am-8:15am** and drop-offs between **4:15pm-4:45pm**. Parents/Guardians are responsible for being at the appropriate stop and **signing the child ON and OFF** of the bus. **Staff will NOT come to the door**. One warning will be given for missing the bus before pick-up or drop-off transportation privileges will be revoked. The bus will **NOT** return for a re-pick-up/drop-off. All participants must be at Kid City by **8:30am** and picked up by **5:30pm**. _____ (parent initials)

Late Fee Policy

Kid City closes at 5:30pm and all participants must be picked up promptly at that time. **The late fee is \$1.00 per minute per child after 5:30pm**. You will receive 1 warning for late pick-up before being charged. Calling ahead and notifying staff of late pick-up will not excuse the fee. Please have alternate arrangements in case of car trouble, work related issues, miscommunication etc. The late fee is expected to be paid by the following Weekly summer fee due date or the following Monday. Lack of paying the late fee could result in loss of the student's ability to participate in programming until the fee is taken care of. _____ (parent initial)



Transportation/Field Trip Permission Slip

I give my permission for my child(ren) to attend all field trips, participate in all Summer Programming Activities and to ride on Coalition Transportation in order to attend and participate in all Summer Programming Activities and field trips.

I also understand that in the event of inclement weather or other unforeseen circumstances our scheduled activity may change. All parents will receive a calendar of daily scheduled events and activities as well as a list of possible alternative field trips and activities on the first day of Summer Programming. Site Coordinators will make every effort to keep all parents notified of schedule changes when possible.

Parent/Guardian Name: _____

Child/Children's Name(s):

Parent/Guardian Signature: _____ Date: _____

Coalition Staff Signature: _____ Date: _____



Please circle all numbers that apply to the observed behavior of the child. All documentation must be signed and dated on the day of the occurrence.

Bus/Van Rules Discipline Sheet

1. Keep hands inside bus/van at all times. 1st 2nd 3rd
2. Keep hands and feet to themselves; respect others space. 1st 2nd 3rd
3. Stay seated at all times. 1st 2nd 3rd
4. Do not climb over or under seats. 1st 2nd 3rd
5. No fighting, screaming or shouting. 1st 2nd 3rd
6. Always listen to what the driver/monitor is saying. 1st 2nd 3rd
7. Keep backpacks on the floor, under your seat. 1st 2nd 3rd
8. Keep all personal objects in backpack at all times. 1st 2nd 3rd
9. Remove trash from bus/van. 1st 2nd 3rd
10. Remain quiet when entering a parking lot. 1st 2nd 3rd
11. Follow directions the first time asked. 1st 2nd 3rd
12. Do not argue with the monitor, driver or other passengers on the bus. 1st 2nd 3rd

1 st Offense- Verbal Warning _____	Staff Signature	Date
2 nd Offense- Written Warning (signed by parent) _____	Staff Signature	Date
3 rd Offense- Suspension of bus privileges(signed by parent) _____	Staff Signature	Date

Parent/Guardian Signature

Date



Student's Name _____

Grade Entering: _____

Last

First

MI

HEALTH/BEHAVIOR ACKNOWLEDGEMENT

If your child's health or behavior becomes unmanageable at any time, a parent/guardian will be notified and pick up is required within the hour. In the event that a parent/guardian cannot be reached, emergency contacts will be used.

I _____, understand the policies and procedures as stated above.

Parent/Guardian Initials: _____

PG MOVIE RELEASE CONSENT

Due to the fact that most children's animated movies are rated PG, we need your consent to show these movies to your child. Movies are prescreened for approval and shown every day during morning drop-off and afternoon pick-up.

My child _____ has permission to view PG rated films while attending Coalition For Kids Summer Program.

Parent/Guardian Initials: _____

ELECTRONIC DEVICES POLICY

Students should leave ALL electronic devices and cell phones at home. Any infractions could result in removal from the C4K Summer Program.

*Coalition For Kids will not be responsible for lost, stolen or damaged equipment.

Parent/Guardian Initials: _____

SUNSCREEN PERMISSION

I _____, give permission to Coalition For Kids Staff to apply sunscreen to my child _____.

*Coalition asks that each family provide 1 bottle of sunscreen to be used by C4K Staff on C4K students.

SWIM SKILLS

My child is a: (please check one)

- Non-swimmer
- Beginner
- Intermediate
- Advanced

Parent/Guardian Signature _____ Date _____



Authorized Pick-Up Form

Child's Name _____ Grade 1 2 3 4 5 6 7 8 9
 Child's Name _____ Grade 1 2 3 4 5 6 7 8 9
 Child's Name _____ Grade 1 2 3 4 5 6 7 8 9
 Child's Name _____ Grade 1 2 3 4 5 6 7 8 9

Parent Information

Parent/Guardian Name _____ Parent/Guardian Name _____
 Mobile Phone Number _____ Mobile Phone Number _____
 Work Phone Number _____ Work Phone Number _____
 Shared Custody Plan (if applicable) _____

Authorized Pick Up

*Note: When parent/guardian cannot be reached the APU should be able and willing to:

- Transport child to and from Kid City in timely manner
- Have a working phone number
- Pick up child in case of emergency

1. Name _____ Phone _____ Relationship _____
 *Signature _____ Address _____ City _____ State _____ Zip _____
 2. Name _____ Phone _____ Relationship _____
 *Signature _____ Address _____ City _____ State _____ Zip _____
 3. Name _____ Phone _____ Relationship _____
 *Signature _____ Address _____ City _____ State _____ Zip _____
 4. Name _____ Phone _____ Relationship _____
 *Signature _____ Address _____ City _____ State _____ Zip _____

This document must be signed by all Authorized Pick Up's and turned in to a Coalition For Kids Site Director. All signatures should be clear and legible.

Any Person **NOT** allowed to pick up my child/children: _____

** Court Documents required on file**



Summer Fee Payment Policy

Weekly Fees

You will be assessed a weekly fee based on your income and family size. The weekly fee is due on **Monday** of each week in order for your child to attend. Please plan ahead in order to be able to pay your weekly fees on time. Fees may be paid to your Site Coordinator during afternoon pick-up or you may send your fees in a sealed envelope with your name and your child's name included. Receipts/Invoices will be available on Friday afternoons. If you have extenuating circumstances and cannot pay your fee, you must call Jordan Spain @ 434-2031 ext. 819 in order to make payment arrangements. We accept Families First Child Care Certificates as well. If you provide a valid Families First Child Care Certificate, your weekly fees will be waived.

***A Non-Refundable Registration Fee of \$15 and your first week's fee are due by Friday, April 13th.** If this fee is not paid on time, your child(ren)'s will be dropped from our roster and placed on a waiting list- No Exceptions!

I, _____ understand that I am responsible for all fees and I agree to pay them on time. I also understand that I will be responsible for making alternate child care arrangements if I cannot pay my fees on time. _____(Initial)

Please start planning now in order to be able to pay your weekly fees!

NO LATE FEES WILL BE ACCEPTED!