



Art by: Carter Sayre

**WAVERLY STUDENT  
CENTER PRESENTS:  
S.T.E.A.M. POWERED  
SUMMER CAMP 2024**

Located at  
Waverly East Intermediate  
3131 W. Michigan Ave.  
Lansing, MI 48917  
Outside Door #14  
Phone #: 517-321-6999  
Hours: 6:30am-6pm

## Summer Enrollment Process 2024

### Waverly Student Centers

- Complete every page in the Student Centers Summer Packet. Circle dates that your child will attend on the calendars (please turn in a separate calendar for **EACH STUDENT** attending.)  
**\*3 Day MINIMUM\* \*\*ENROLLMENT PACKETS WILL BE RETURNED IF INCOMPLETE!\*\***
- For days that are scheduled as “half days,” half days are considered 5 hours or less. **Please circle the estimated DROP OFF time for HALF DAYS.** (i.e. AM HALF DAY=drop off BEFORE 11am; PM half day= drop off AFTER 11am)
- **Registration Fee:** \$50 per child (includes field trip t-shirt, backpack and water bottle)
- **Activity Fees:** \$15 per week per child. (ALL activity fees due at the time of enrollment. (i.e. if you sign up for 9 weeks of care: \$135 plus registration fee is due at time of enrollment)  
**\*ASK ABOUT THE GOODIES FACTORY/POPPIN POPCORN FUNDRAISER TO HELP OFF SET THE COST OF ACTIVITY FEES!\***
- Include money order payment or completed Tuition Express form to pay the registration fee(s) and activity fees for the summer program to complete the enrollment process. Registration fee includes **ONE** field trip shirt, a Student Center backpack and a water bottle.
- **CURRENT TUITION BALANCE MUST BE PAID IN FULL BEFORE ENROLLING!**
- **Turn the packet in to the Student Center no later than Friday April 26<sup>th</sup>. Enrollment is on a FIRST COME, FIRST SERVE basis.** If your child’s classroom fills up **BEFORE** April 26<sup>th</sup>, your child will be placed on a **WAITING LIST. Student Center cannot guarantee that a spot will be available or that field trip shirts will be available. ALL FEES ARE DUE UPON ENROLLMENT! \*If you participate in the fundraiser, your profits will be applied to your account after April 28<sup>th</sup>.**
- **Once the enrollment deadline has passed, we will NOT be able to add on weeks or field trip days!** Schedule adjustment requests may be made in writing a minimum of 48 hours in advance and are up to Supervisor discretion. Changes are not guaranteed.
- **STUDENTS MUST ARRIVE AT LEAST 30 MINUTES BEFORE THE SCHEDULED FIELD TRIP TIME!**
- If you are interested in volunteering, please complete the background check form on pages 7 & 8 of this packet.
- **Please read the full contract carefully as some policies have changed.**

\*Summer Enrollment Packets should be turned in to Lacey Balzer or Hanna Sayles. They can be submitted to the child care office or via e-mail. **\*\*PLEASE DO NOT EMAIL PICTURES OF THE ENROLLMENT PACKET!\*\* \*ENROLLMENT PACKETS WILL BE DATE/TIMESTAMPED and INITIALED by RECIPIENT\***

For further questions contact Lacey Balzer (Childcare Supervisor) [lbalzer@waverlyk12.net](mailto:lbalzer@waverlyk12.net) or Hanna Sayles (Assistant Childcare Supervisor) [hsayles@waverlyk12.net](mailto:hsayles@waverlyk12.net)

\*Please keep this page for your records.\*



## Summer Camp 2024 Rates

Waverly Student Center will be open 6/10/24-8/9/24 (9 Weeks) at Waverly East Intermediate.

**Select full time or part time options (3 days per week minimum)**

Fee	First Child	Additional Child(ren)
<b>Summer Registration (includes summer field trip t-shirt, water bottle and a Student Center drawstring backpack)</b>	\$50	\$50
<b>Activity Fees (non-refundable)</b>	\$15/week of attendance	\$15/week of attendance
<b>Half Day (5 hours or less)</b>	\$30	\$25
<b>Full Day (more than 5 hours)</b>	\$42	\$35
<b>FEE FOR NO SHOW/CANCELLATION WITHOUT 24 BUSINESS HOURS NOTICE</b>	\$15/day	\$15/day

- Student Center will provide an afternoon snack and drink as well as occasional theme related treats. Please notify SC Staff if your child has any food allergies.
- Student Center families may choose to participate in the Waverly School District's summer free food program for breakfast and lunch each day. Free breakfast and lunch will be provided beginning **6/17/24 until 6/28/24 and 7/8/24-8/9/24. PLEASE SEND A COLD LUNCH FOR THE WEEK OF 6/10-6/14/23 and THE WEEK OF 7/1-7/5/2024.** When sending your child with a cold lunch, please remember that Student Center is a NUT-FREE facility due to allergies. **\*\*PLEASE PROVIDE AN ICE PACK IN LUNCH BOXES FOR ANYTHING THAT NEEDS TO REMAIN CHILLED. STUDENT CENTER DOES NOT HAVE REFRIDGERATOR SPACE TO STORE LUNCH BOXES.\*\*** STUDENT CENTER DOES NOT MICROWAVE MEALS.
- Registration fees and activity fees are NON-REFUNDABLE and due UPON ENROLLMENT. If your child's classroom fills up before April 26<sup>th</sup>, your child will be placed on the waiting list. Enrollment is on a FIRST COME, FIRST SERVE basis. School year tuition must be up-to-date (no past due balance) when submitting paperwork. Paperwork will be date and time stamped upon submission. Student Center staff will not guarantee enrollment in the Summer Program. If you want to inquire about Summer enrollment status AFTER paperwork submission, please reach out to Lacey Balzer or Hanna Sayles via E-MAIL.
- Activity fees cover all field trip expenses for the summer including transportation and admission fees AS WELL AS supplies for each week.

\*Please keep this page for your records. \*

## Summer Camp 2024 Registration Reminder

**Please remember to bring the following items when you pack for your child's Summer Camp Adventures! (Items can be left at Student Center in a bag labeled with your child's name. They will need to be taken home weekly for washing or after use.)**

- Bathing Suit
- Towel
- Water Shoes
- Change of Clothes (appropriate for summer including underwear and socks)
- Gym Shoes
- Light Weight Jacket
- Sheet/Blanket
- Sunscreen/Bug Spray (Student Center does not provide Sunscreen or Bug Spray.) Please label items with your child's name to keep at Student Center.

**Have you completed all of your child's enrollment paperwork? (REQUIRED)**

- Registration Form
- Emergency Card
- Medical History Form
- Getting Acquainted
- Parent Agreement
- Playground Consent & Liability Waiver
- Written Information Documentation
- Attendance Calendars

**\*\*\*Electronic devices are permitted under the discretion of the Director. Electronics time will be SCHEDULED daily and in line with licensing restrictions of "non-interactive media." The center will not be held responsible for any lost or broken electronic devices.**

**ANY STUDENTS FOUND PLAYING GAMES/WATCHING VIDEOS THAT ARE NOT SCHOOL APPROPRIATE WILL LOSE THEIR ELECTRONICS PRIVILEGES.**

**\*\*\*Field Trip permission slips will be available at least 1 week prior to field trips. Please make sure that you sign next to your students name in order for your student(s) to be allowed on the school bus. Students will be REQUIRED to attend field trips if they are in attendance. If your child forgets their shirt, arrives after the bus has left OR behavior prohibits field trip attendance, your child will be required to stay home. \*Exception: \*Summer School Enrollment \* If your student is signed up for SUMMER SCHOOL and WILL NOT be attending field trips, 1-2 staff members will be on-site for Summer School students. (If we do not have ADVANCED NOTICE of these circumstances, staff WILL NOT BE AVAILABLE ON-SITE.)**

**\*\*\*STUDENTS MUST ARRIVE AT LEAST 30 MINUTES BEFORE THE SCHEDULED FIELD TRIP TIME!**

**\*\*\*Field Trip shirts must be worn on ALL field trips. Student Center will have a LIMITED number of extra field trip shirts available for purchase (\$15 each) if a shirt is forgotten. One field trip shirt is included in the registration fee. A child will not be permitted to attend an off-site field trip without their field trip shirt.**

\*Please keep this page for your records.\*

# Student Center Summer Camp 2024

## Week 1: **T.E.A.M. Building**

Teaching team building skills to children today will ensure that they are well rounded and compassionate adults in the future. When students participate in team building activities, a new trust is formed. In the team building process children will learn how to react to others and how to better deal with conflict. This week's activities will bring kids together to share, play and win in a positive way leading to a successful Summer here at Student Center. Activities this week will include bullying prevention, self portraits, team building games and a team building field trip to the Howell Nature Center.

## Week 2: **In the Garden**

Campers investigate all aspects of nature including weather, bugs and habitats. Their green thumbs will be put to the test as they create their own mini gardens and learn about the life cycle of plants. We will take a trip to explore Frederik Meijer Gardens & Sculpture Park. Students will become scientists as they explore and identify the variety of plants that grow in and around Michigan's Farm Garden.

## Week 3: **Abracadabra!**

If its fascination and illusion that you seek, come along for this magical week! We will explore the wonderful world of magic through hands on activities. For this enchanting week, we will have Magician Alan Kazam visit us on-site for a magic show and workshop!

## Week 4: **Around the World**

Through art, students will have lots of fun travelling to different areas of the world without ever having to get on a plane! Their minds will be open to new experiences and learning about diverse cultures with creative activities!

## Week 5: **Smitten With the Mitten: Books Written and Illustrated by Michiganders**

From Patricia Polacco to John Rand, Michigan is the home to many talented authors and illustrators. Student Center campers will read books written and illustrated by Michigan natives and will have an opportunity to write and illustrate their own stories this week!

## Week 6: **Animal Planet**

For campers who love all animals, we have amazing Animal Adventures! Campers will learn about a wide variety of animal friends that share our world. Animal themed games, crafts and activities will showcase animal adaptations and diversity. Of course, animal camp would not be complete without a trip to the Detroit Zoo!

## Week 7: **Full S.T.E.A.M. Ahead**

Children naturally use their curiosity to explore, experiment, observe and play. This creative exploration allows for the kids to think like scientists, where they can observe, problem solve, and role play. This week we will integrate Science, Technology, Engineering, Art and Math in a creative and meaningful way.

## Week 8: **Sports Extravaganza!**

Hut, hut, hike! Go long and catch some sports action this week with activities and games that are all about building your child's most important athletic muscle – their brain! We have ideas for sports fans, and non-athletes, and everyone in between with beanbag tosses, dartboards, gold medals, and more. With this week being the first full week of the 2024 Summer Olympics, we will tie in some Olympic activities and watch some highlights from the games!

## Week 9: **Think Big: Investigating Inventions**

Childhood curiosity, experimentation, and imagination can develop one's play instinct—an inner need according to Carl Jung. This week campers will investigate how things work and who invented some of the things we use on a daily basis!

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# WAVERLY COMMUNITY SCHOOLS Pride. Tradition. Excellence.

## VOLUNTEER/CHILD CARE BACKGROUND CHECK

Service to provide: \_\_\_\_\_ Date(s) to Provide Service: \_\_\_\_\_

Please circle one: VOLUNTEER                      CHILD CARE                      INTERN

Building(s) \_\_\_\_\_

In order to ensure the protection of children in the care of Waverly Community Schools, school policy requires, prior to any and all persons providing a volunteer service at the school or for any function conducted by the school; all potential volunteers complete a background check. The background check is a name check only, through the State of Michigan ICHAT system and is based on individual identifiers. Any applicant declining to complete a "Volunteer Background Check" acknowledgment form will not be considered.

### POTENTIAL VOLUNTEER INFORMATION

Full Printed Name: \_\_\_\_\_

Maiden name or other name(s) previously used: \_\_\_\_\_

DOB: \_\_\_\_\_ Sex: \_\_\_\_\_  
[mm/dd/yyyy]

Race (Please check one): White \_\_\_ Black \_\_\_ Asian/Pacific Islander \_\_\_ American Indian/Alaskan Native \_\_\_  
Unknown/Other \_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

### HISTORY INFORMATION

1) Have you volunteered at Waverly Community Schools before?  Yes  No

2) Have you ever pled guilty, or been convicted of a felony in a state or federal court?

Yes  No

Date and state offense/conviction occurred: \_\_\_\_\_

If yes, provide a detailed description of the conviction: \_\_\_\_\_

\_\_\_\_\_



# WAVERLY

## COMMUNITY SCHOOLS

**Pride. Tradition. Excellence.**

Have you ever pled guilty, or been convicted of a misdemeanor in a state or federal court?

Yes  No

Date and state offense/misdemeanor occurred: \_\_\_\_\_

If yes, provide a detailed description of the conviction: \_\_\_\_\_

**3) Are you the subject of a current criminal investigation or have pending charges against you?**

Yes  No

Date and state the investigation is ongoing: \_\_\_\_\_

If yes, provide a detailed description of the investigation or pending charges: \_\_\_\_\_

**\*\*FOR CHILD CARE ONLY:**

**4) U.S. Citizen:** Yes \_\_\_\_ No \_\_\_\_ **Have you ever lived outside of Michigan?** Yes \_\_\_\_ No \_\_\_\_

If you have lived outside of Michigan, please indicate where and when. Location \_\_\_\_\_  
 Year(s) \_\_\_\_\_

Waverly Community Schools reserves the right to “approve” or “deny” any volunteer service upon review of the background check returned. The determination will be based upon the individual’s fitness to have responsibility for the safety and wellbeing of children. Providing false information, or information contradicting to the background check information, is grounds for immediate volunteer denial.

By affixing your signature to this form you acknowledge your statements are to be true and give full consent to complete the requested background check. Please note that any incorrect, false, or incomplete information to the questions above will be grounds for stopping the employment, volunteering, or doing an internship.

Signature: _____ Date Signed: _____	<input type="checkbox"/> <b>Permission is granted to have this background volunteer screening performed annually</b>
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Please return completed form to the Main Office of the building. Questions or concerns, please contact Matt Corliss at 319-3023 or by email at mcorliss@waverlyk12.net

**OFFICE USE ONLY**

Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	Date Approved/Denied _____	Determining Staff Member _____
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Date of Application: \_\_\_\_\_ Date you wish your child to begin \_\_\_\_\_

**CHILD**

NAME \_\_\_\_\_ GRADE (entering Fall 2024) \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ GENDER: \_\_\_\_\_ PREFERRED PRONOUNS: \_\_\_\_\_

**Field Trip Tee Shirt Size:    YS  YM  YL  YXL  ASM  AM  AL  AXL**

**(If the company runs out of the size needed, we will size UP one.)**

**Parent/Guardian Information**

**Guardian**

First Name: \_\_\_\_\_ M.I. \_\_\_\_ Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_  **Check for Text Messaging: Service Carrier:** \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mother/Guardian SS#: \_\_\_\_\_ Email: \_\_\_\_\_

[ ] Custodial Parent (If married, mark both parents)

**Guardian**

First Name: \_\_\_\_\_ M.I. \_\_\_\_ Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_  **Check for Text Messaging: Service Carrier:** \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Father/Guardian SS#: \_\_\_\_\_ Email: \_\_\_\_\_

[ ] Custodial Parent (If married, mark both parents)

**PG-Movie Permission:** I give permission for my child to view carefully selected movies with a PG rating.

**Please circle and initial \_\_\_\_\_ Yes/No**

**Photo Release:** I give permission for my child to be photographed or videotaped during Waverly Child Care hours. I understand that the photo/videos will be used for information/promotional purposes, newsletters, Facebook and Website related to Waverly Community Schools Student Centers.

Please circle and initial:

**Newsletters (Newsletters are emailed to all enrolled families and posted to the Facebook page and Waverly website.)**  
\_\_\_\_\_ **Yes/No**

**Facebook** \_\_\_\_\_ **Yes/No**

**District Website** \_\_\_\_\_ **Yes/No**



**Automated Payment Processing**  
**Safe – Convenient – Easy**

We are excited to offer the safety, convenience and ease of Tuition Express® — a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

**ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT and CREDIT CARD**

I (we) hereby authorize (business name) \_\_\_\_\_ to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. \_\_\_\_ (initial) Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

**COMPLETE ONE SECTION ONLY**

**SECTION A (Credit Card)**

Cardholder Name	Phone #
Cardholder Address	City State Zip
Account Number	Expiration Date
Cardholder Signature	Date

**SECTION B (Bank Account)**

Your Name	Phone #
Address	City State Zip
Bank or Credit Union Name	Bank or Credit Union Address City State Zip
Routing Transit Number (see sample below)	Account Number (see sample below) <input type="checkbox"/> Checking <input type="checkbox"/> Savings
Authorized Signature	Date

**For Official Use Only**

Date Received
Employee Signature



A service of





## Waverly Student Center

### Student Behavior Expectations

- ❖ I will follow directions the first time they are given.
- ❖ I will keep my hands, feet and all objects to myself.
- ❖ When in the building, I will use the voice level that is expected by my teacher during an activity.
- ❖ I will use appropriate language.
- ❖ I will ask a teacher for permission to leave the classroom.
- ❖ I understand that the Student Center is not responsible for the loss, theft, damage, or vandalism to student property including electronic devices and that the use of electronic devices is at Student Center staff's discretion.
- ❖ I will not willfully vandalize Student Center property. (Vandalism is defined as the willful destruction and defacing of district/program property. The student and parent will be held financially responsible for damages including, but not limited to, the cost for district staff or others to repair, replace, and/or clean-up the damaged property.)
- ❖ I will not participate in bullying behavior.

Some examples of specific behaviors that constitute bullying include but are not limited to:

- Spreading rumors or posting degrading, harmful, or explicit pictures, messages, or information using social media or other forms of electronic communication (also known as "[cyber-bullying](#)").
- Taunting or making sexual slurs about a person's gender orientation or sexual status.
- Name-calling, joking, or making offensive remarks about a person's religion, gender, ethnicity, or socioeconomic status.
- Physical acts of aggression, such as punching, slapping, or tripping someone.

#### Behavior Policy for Physical Aggression:

- 1<sup>st</sup> Incident: Warning- Verbal/Written: Conversation with parent
- 2<sup>nd</sup> Incident: 1 Day Suspension
- 3<sup>rd</sup> Incident: 2 Day Suspension
- 4<sup>th</sup> Incident: 1 Week Suspension
- 5<sup>th</sup> Incident: Meeting with parent to discuss behavior plan
- 6<sup>th</sup> Incident+: Determined by Behavior Plan

**\*Persistent VERBAL/SOCIAL Bullying WILL fall under the Behavior Policy for Physical Aggression. \***

I understand that my student is expected to follow all of the behavior expectations listed above. I understand that if he or she does not, he or she may be removed from the program.

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

### CHILD INFORMATION RECORD

State of Michigan - Department of Licensing and Regulatory Affairs - Child Care Licensing Bureau

Instructions: Unless otherwise indicated, all requested information must be provided. If the information is not known or does not apply, "unknown" or "none" is the required response. A blank field, a line through a field or "N/A" are not acceptable responses.

<b>For Provider Use Only:</b>		Date of Admission	Date of Discharge	
Name of Child (Last, First, Middle Initial)				Child's Date of Birth
Address (Number and Street, Building/Apartment Number)			City	State
			Zip Code	
Parent/Legal Guardian's Name		Primary Phone ( )	Parent/Legal Guardian's Name (Optional)	
			Primary Phone ( )	
Home Address (if not child's address)		2 <sup>nd</sup> Phone (if applicable) ( )	Home Address (if not child's address)	
			2 <sup>nd</sup> Phone (if applicable) ( )	
City	State	Zip Code	City	State
Email Address (optional)		Email Address (optional)		
Employer Name		Work Phone ( )	Employer Name	
			Work Phone ( )	
Name of Child's Physician or Health Clinic			Physician's or Health Clinic's Phone Number ( )	
Hospital Preferred for Emergency Treatment (optional)				
Allergies, Special Needs and/or Special Instructions? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain: (Attach additional sheets, if necessary.)				

CCL-3731 (Rev. 3/17/2022) Previous editions 7-18 & 4-21 may be used

See Reverse Side

**Emergency Contact & Release of Child:** List all individuals, including parents/legal guardians, in order of preference, to be contacted in an emergency. If possible, include at least one person other than the parents/legal guardians to be contacted in an emergency and to whom the child can be released. The second phone number column can be left blank. (If more individuals, attach additional sheets.)

1.	( )	( )
2.	( )	( )
3.	( )	( )

**Release of Child Only:** List all individuals, other than the parents/legal guardians, to whom the child may be released. (If more individuals, attach additional sheets.)

1.	( )	2.	( )
3.	( )	4.	( )

**Parent/Legal Guardian Initials:**

\_\_\_\_\_ I give permission to \_\_\_\_\_ Waverly Student Center \_\_\_\_\_, licensed by the Department of Licensing and Regulatory Affairs to secure emergency medical treatment for the above named minor child while in care.

**I certify that I accurately completed this form and if anything changes, I will notify the provider by updating this form.**

Signature of Parent or Guardian \_\_\_\_\_ Date Signed \_\_\_\_\_

Date Card Reviewed	Parent or Legal Guardian Initials	Date Card Reviewed	Parent or Legal Guardian Initials	Date Card Reviewed	Parent or Legal Guardian Initials	Date Card Reviewed	Parent or Legal Guardian Initials

LARA is an equal opportunity employer/program.	AUTHORITY: 1973 PA 116 COMPLETION: Required PENALTY: Rule Violation Citation.
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*MEDICAL HISTORY AND CUSTODIAL INFORMATION*

CHILDS NAME/D.O.B.: \_\_\_\_\_

I hereby certify that my child is in good health, their immunizations are up-to-date and his/her immunizations or immunization waiver is on file with the school.

PARENT(S) NAME: \_\_\_\_\_ PARENT(S) SIGNATURE: \_\_\_\_\_

Date: \_\_\_\_\_

*PARENT PERMISSION FOR TOPICAL, NON-PRESCRIPTION MEDICATION*

I GIVE PERMISSION TO THE STAFF OF WAVERLY COMMUNITY SCHOOLS STUDENT CENTERS, TO APPLY TOPICAL, NON-PRESCRIPTION MEDICATION PROVIDED BY ME (PARENT/GUARDIAN) (SUNSCREEN, INSECT REPELLENT, CHAPSTICK, LOTION, COUGH DROPS, ETC.) ON MY CHILD. \*Please note that students will not be permitted chapstick/lotion/bug spray/etc. without a signed form. As always, prescription and over-the-counter medications will require a completed medication form.\*

PARENT(S) SIGNATURE: \_\_\_\_\_

Date: \_\_\_\_\_

*MEDICAL HISTORY*

PLEASE LIST BELOW ANY MEDICAL, SOCIAL AND/OR EMOTIONAL CONCERNS OR ALLERGIES (FOOD/ENVIRONMENTAL/MEDICATION/ETC.) THAT OUR STAFF NEED TO BE AWARE OF REGARDING YOUR CHILD. Please include if your child has a documented IEP/504 Plan.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

*CUSTODIAL CONCERNS*

*(Including individuals that are not allowed to pick up, etc.)*

PLEASE INFORM THE STAFF IN WRITING BELOW IF THERE ARE ANY CONCERNS WITH CUSTODIAL SITUATIONS IN REGARD TO YOUR CHILD.

1. \_\_\_\_\_

2. \_\_\_\_\_

I HAVE A COURT DOCUMENT REGARDING THE ISSUES OF CUSTODIAL CONCERNS YES / NO

**If "yes," please submit a copy to Student Center Staff.**

## Playground Consent

The Department of Human Services, Office of Child Day Care Licensing has developed criteria for playgrounds and playground equipment as follows:

R400.8170 Outdoor Play Area

Rule 170

(11) The playground equipment, use zones, and surfacing in the outdoor play area shall be inspected by a certified playground safety inspector and an approval granted for playground equipment and areas used before issuance of an original provisional license, upon request of the department, and before using any newly added playground equipment. The center shall provide documentation of the inspection to the department upon request and shall keep it on file at the center.

**(19) School-Age Centers operating in school buildings approved by the Michigan Department of Education are exempt from sub rule (11) of this rule, provided the licensee informs parents, in writing at the time of enrollment, if the center plans to use a public school's outdoor play area and equipment that does not comply with this rule.**

**In order for a child enrolled in a licensed program within a school approved by the Michigan Department of Education to utilize the playground, guardians must give their consent. Please sign below to provide permission for your child to use outdoor school play areas with equipment that may not comply with sub rule 11 above.**

Parent Name: \_\_\_\_\_

Parent Signature/Date: \_\_\_\_\_

### Parent/Legal Guardian Waiver and Release of Liability ("Waiver")

I am the parent/legal guardian of \_\_\_\_\_, and I give my child permission to participate in the **WAVERLY STUDENT CENTER** ("the Program"), an enrichment and recreational program organized by Waverly Community Schools (the "District").

I understand that this opportunity is voluntary and I have voluntarily opted for my child to participate. I further understand that the Program will involve activities including but not limited to use of school playground equipment and science experiments, that some events may take place off District grounds, and that some activities carry the potential for death, serious injury, and property loss.

On behalf of myself, my child, my family, and my successors, heirs, and assigns, I assume the risk of any and all injury that may occur in any manner related to the Program's activities. I freely and voluntarily agree to indemnify, defend, release, and forever hold harmless the District and its board members, officers, employees, volunteers, and agents from any claims, damages, costs, and/or responsibility of any kind ("Liability") that may be asserted by any person or entity for Liability, including attorney fees, caused by or arising out of my child's participation in the Program. This Waiver shall survive termination and/or completion of the Program and my child's participation therein.

**Printed Name of Parent/Guardian:** \_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

## WRITTEN INFORMATION PACKET DOCUMENTATION

Michigan Department of Licensing and Regulatory Affairs  
Bureau of Community and Health Systems

Child(ren)'s Name(s) (Last, First)	Center Name <b style="text-align: center;">Waverly Student Center</b>
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A written information packet has been provided at the time of enrollment. The packet included all the following information:

- Criteria for admission and withdrawal.
- Schedule of operation, denoting hours, days, and holidays during which the center is open and services are provided.
- Fee policy.
- Discipline policy.
- Food service program.
- Program philosophy.
- Typical daily routine.
- Parent notification plan for accidents, injuries, incidents, illnesses.
- Exclusion policy for child illnesses.
- Notice of the availability of the center's licensing notebook.
  - The licensing notebook contains all the licensing inspection and special investigation reports and related corrective action plans since May 28, 2010.
  - The licensing notebook is available to parents during regular business hours.
  - Licensing inspection and special investigation reports from at least the past two years are available on the child care licensing website at [www.michigan.gov/michildcare](http://www.michigan.gov/michildcare).
- Other \_\_\_\_\_

I certify that I received all of the above items.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**Note:** A single BCAL-4340 form may be used for all children in the same family.

LARA is an equal opportunity employer/program.

Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.



WAVERLY STUDENT CENTER

Getting Acquainted with Your Child

To help us provide the best care possible for your child, please complete and return this form with your registration packet.

-Reviewed only by Student Center staff. -

Child's Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Nickname/Name your child prefers to be called/Preferred pronouns: \_\_\_\_\_

Parent(s)/Guardian(s) Name

Mother/Guardian/Step-Parent \_\_\_\_\_ Father/Guardian/Step-Parent \_\_\_\_\_

\_\_\_\_\_

Marital Status:      Married      Single      Divorced      Widowed      Other

Siblings Names & Ages \_\_\_\_\_

\_\_\_\_\_

My child's favorite toys are \_\_\_\_\_

Have there been any changes in your child's life recently? \_\_\_\_\_

\_\_\_\_\_

My child's greatest fears are: \_\_\_\_\_

When angry, my child will: \_\_\_\_\_

My child has difficulty: \_\_\_\_\_

Please share any family traditions/holiday celebrations/heritage information. Are there any holidays that your family does NOT celebrate?: \_\_\_\_\_

\_\_\_\_\_

My child will need assistance with (i.e. going to the bathroom/remembering to use the bathroom, understanding/following directions, etc.): \_\_\_\_\_

\_\_\_\_\_

Other helpful information about your child:

\_\_\_\_\_



### Waverly Student Center Tuition:

- **Complete calendars for the entire summer** with the dates that your child will be attending Student Center circled. (**Schedule is required** to facilitate student bussing and staff-to-student ratios.)
- Student Center requires a **3-day attendance minimum per week**. You will be charged for 3 days if minimum is not met.
- If your child will be scheduled for a HALF DAY, please circle the **APPROXIMATE TIME OF ARRIVAL**. HALF DAY care is 5 hours or less.
- **There will be a fee of \$15/child/day if a child is scheduled to attend and does not show up/cancels without 24 hours' WRITTEN notice (i.e.: via e-mail to Lacey Balzer or Hanna Sayles).**
- Tuition will be charged based on the schedule that is turned in. "Add On" days require SUPERVISOR AUTHORIZATION. We do not accommodate "drop in" care. **FIELD TRIP DAYS CANNOT BE ADDED AFTER APRIL 26<sup>th</sup> DEADLINE.**
- Payment for each week will be due by 12pm on Monday of the following week.
- A late fee of \$20.00 will be applied to accounts that are 2 weeks past due.

Please outline below whom is responsible for payment of tuition and fees.

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#### Parent Agreement (please initial each policy):

- \_\_\_\_\_ I agree to clock my child in and out on the kiosk each day of attendance.
- \_\_\_\_\_ I agree to walk my child(ren) to their classrooms doors upon drop off.
- \_\_\_\_\_ I agree to call or email the childcare site 24 **business hours** in advance to inform staff of a child's absence. I understand that I will be charged a "no show" fee if the Student Center is not notified of an absence without 24 business hours notice. **(I understand that I cannot add field trip days after April 26<sup>th</sup> 2024.) "NO SHOW" fees will be waived if a doctor's note is submitted PRIOR to tuition billing.**
- \_\_\_\_\_ I understand that the childcare program is a **nut-free** environment, and I will ensure that no nut products are sent with my child for lunch, snack or special treats.
- \_\_\_\_\_ I understand that I will be informed and must provide permission for all planned field trips.
- \_\_\_\_\_ I agree to take full responsibility for any damage to person or property caused by my child while in care.
- \_\_\_\_\_ I agree that I, or one of my emergency contacts, will pick up my child immediately if their behavior or health requires sending them home.
- \_\_\_\_\_ I understand that after 6:00 p.m. I must pay a late fee of \$1.00 for each of the first 5 minutes (\$5.00) and \$2.00 for each additional five-minute period or portion thereof, after the classroom session ends.
- \_\_\_\_\_ I understand that the Waverly Student Center's Parent Handbook details these and other policies and procedures, and that I have received a Parent Handbook upon enrollment.
- \_\_\_\_\_ Students will be **REQUIRED** to attend field trips if they are in attendance. If your child forgets their shirt, arrives after the bus has left OR behavior prohibits field trip attendance, your child will be required to stay home. **\*Exception: \*Summer School Enrollment \* If your student is signed up for SUMMER SCHOOL and WILL NOT be attending field trips, 1-2 staff members will be on-site for Summer School students. (If we do not have ADVANCED NOTICE of these circumstances, staff WILL NOT BE AVAILABLE ON-SITE.)**
- \_\_\_\_\_ I understand that my child will ride a Waverly School District bus for all summer field trips unless prior arrangements have been made.
- \_\_\_\_\_ I understand that it is my responsibility to notify the Student Center staff of any special needs (i.e. IEP, 504, medical needs, allergies, etc.) so that they can plan accordingly to provide the best care possible for my child. **This would also include a child who is allowed to self-carry an inhaler or epi-pen.**
- \_\_\_\_\_ I understand that the Student Center is not responsible for the loss, theft, damage, or vandalism to student property including electronic devices and that the use of electronic devices is at Student Center staff's discretion.

Parent/Guardian Signature & Date:

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Summer 2024

WAVERLY STUDENT CENTER



**WAVERLY**  
COMMUNITY SCHOOLS

Select full day or half day options (3 day per week minimum). Less than 3 scheduled days will be charged for the extra day(s).

Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to accounts with a balance 2 weeks past due.

Half day attendance is 5 hours or less.  
**AM: DROP OFF BEFORE 11am**  
**PM: DROP OFF AFTER 11am**

Students MUST arrive at least 30 minutes before the scheduled "field trip" time.

Field trips are TENTATIVE and SUBJECT TO CHANGE. Student Center Staff will notify parents of changes no later than 1 week before the activity is scheduled.

3131 W. Michigan Ave.  
Lansing, MI 48917  
(Outside Door #14)

Phone:  
 K-1st Grade Room: 517-321-6166  
 2-3rd Grade Room: 517-321-3985  
 4-6th Grade Room: 517-321-1967  
 Student Center Office: 517-321-6999

# June 2024

WARRIOR PRIDE

Sun Mon Tue Wed Thu Fri Sat

THEME:							1
2	3	4	5	6	7	8	Last Day of School! Student Center CLOSED for Summer Set-Up
9	10	11	12	13	14	15	
	Half Day AM PM	Half Day AM PM	Half Day AM PM	Half Day AM PM	Half Day AM PM	Half Day AM PM	
	Full Day	Full Day	Full Day	Full Day	Full Day	Full Day	
16	17	18	19	20	21	22	
	Half Day AM PM	Half Day AM PM	Happy Juneteenth National Independence Day! Student Center CLOSED	Half Day AM PM	Half Day AM PM	Half Day AM PM	
	Full Day	Full Day		Full Day	Full Day	Full Day	
23/30	24	25	26	27	28	29	
	Half Day AM PM	Half Day AM PM	Half Day AM PM	Half Day AM PM	Half Day AM PM	Half Day AM PM	
	Full Day	Full Day	Full Day	Full Day	Full Day	Full Day	

## Schedule of Events

### • Week 1: T.E.A.M. Building

◇ **Thursday June 13th: Howell Nature Center**  
(8:45am-4:30pm)

\* Adventure Play, Games Galore, Wild Wonders Tour and International Explorers (K-2nd)

\* Team Challenge, Games Galore, Wild Wonders Tour and International Explorers (3rd-6th)

### • Week 2: In the Garden

◇ **Tuesday June 18th: Frederik Meijer Gardens & Sculpture Park (9:00am-5:30pm)**

\* Incredible Edible Plants Guided Program

◇ Wednesday June 19th: **STUDENT CENTER CLOSED**

### • Week 3: Abracadabra!

◇ **Wednesday June 26th: On-Site Magician: Alan Kazam**  
(Magic Show: 9:30am-10:20am; Workshop: 10:30am-11:30am)

WAVERLY STUDENT CENTER



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COMMUNITY SCHOOLS

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# July 2024

WARRIOR PRIDE

Sun Mon Tue Wed Thu Fri Sat

THEME:

	1 Half Day AM PM Full Day	2 Half Day AM PM Full Day	3 Half Day AM PM Full Day	4 Happy Fourth of July! Student Center CLOSED!	5 Student Center-CLOSED!	6
7	8 Half Day AM PM Full Day	9 Half Day AM PM Full Day	10 Half Day AM PM Full Day	11 Half Day AM PM Full Day	12 Half Day AM PM Full Day	13
14	15 Half Day AM PM Full Day	16 Half Day AM PM Full Day	17 Half Day AM PM Full Day	18 Half Day AM PM Full Day	19 Half Day AM PM Full Day	20
21	22 Half Day AM PM Full Day	23 Half Day AM PM Full Day	24 Half Day AM PM Full Day	25 Half Day AM PM Full Day	26 Half Day AM PM Full Day	27
28	29 Half Day AM PM Full Day	30 Half Day AM PM Full Day	31 Half Day AM PM Full Day			

## Schedule of Events

- **Week 4: Art Around the World**
  - ◇ Wednesday July 3rd: On-Site: Playing Picasso (12:15pm-3:15pm)
  - ◇ Thursday July 4th: STUDENT CENTER CLOSED
  - ◇ Friday July 5th: STUDENT CENTER CLOSED
  - ◇ Thursday July 11th: Play Michigan All Inclusive Playground (4th-6th) (10am-2pm)
- **Week 5: Smitten With the Mitten: Books Written and Illustrated by Michiganders**
  - ◇ Monday July 8th: School Year 2024/2025 Paperwork AVAILABLE! \*Spaces are on a first come/first served basis. Once we are full, you will be placed on a waiting list until space becomes available!
  - ◇ Tuesday July 9th: Play Michigan All Inclusive Playground (K-1st) (10am-2pm)
  - ◇ Wednesday July 10th: Play Michigan All Inclusive Play-ground (2nd-3rd) (10am-2pm)
- **Week 6: Animal Planet**
  - ◇ Thursday July 18th: Detroit Zoo (9am-5pm)
- **Week 7: Full S.T.E.A.M. Ahead**
  - ◇ Thursday July 25th: Impression 5 (9:30am-3:30pm)
  - \* Engineering Design Challenge
- **Week 8: Sports Extravaganza!**
  - ◇ Tuesday July 30th: Royal Scot (K-1st) (10am-1pm)
  - ◇ Wednesday July 31st: Royal Scot (2nd-3rd) (10am-1pm)
  - ◇ Thursday August 1st: Royal Scot (4th-6th) (10am-1pm)

WAVERLY STUDENT CENTER



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COMMUNITY SCHOOLS

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# August 2024

WARRIOR PRIDE

Sun Mon Tue Wed Thu Fri Sat

THEME:

					1	2	3
					Half Day AM PM	Half Day AM PM	
					Full Day	Full Day	
4	5	6	7	8	9	10	
	Half Day AM PM	Half Day AM PM	Half Day AM PM	Half Day AM PM	Half Day AM PM	Half Day AM PM	
	Full Day	Full Day	Full Day	Full Day	Full Day	Full Day	
11	12	13	14	15	16	17	
	CLOSED Fall Set Up	CLOSED Fall Set Up	CLOSED Fall Set Up	CLOSED	CLOSED		
18	19	20	21	22	23	24	
	CLOSED	CLOSED	FIRST DAY OF SCHOOL: SC CLOSED				
25	26	27	28	29	30	31	

## Schedule of Events

• **Week 9: Think Big: Investigating Inventions**

◇ **Friday August 9th: LAST DAY OF SUMMER PROGRAM**

\* **Wednesday August 7th: Flint Children's Museum (8:30am-3:00pm)**

\* **3 Little Pigs**

• **FIRST DAY OF SCHOOL:**

\* **Thursday August 8th: END OF THE SUMMER FAMILY PICNIC**

◇ **Wednesday August 21st: Student Center CLOSED**

\* **Lunch Food Truck: Cone-Appetit (11:00am-12:00pm)**

\* **Kona Ice Truck: (1:00pm-2:00pm)**

