



WAVERLY

COMMUNITY SCHOOLS

Waverly Student Centers Before and After School Program 2024/2025

- Quality Before and After School experiences
 - Homework help
- STEAM Activities (Science, Technology, Engineering, Art and Math)
 - Snack provided daily

➤ Location	Address	Phone Number	Hours of Operation
East Intermediate School Student Center (Outside Door #14)	3131 W. Michigan Ave. Lansing, MI 48917	K-1 st Grade: 517-321- 6166 2 nd -3 rd Grade: 517- 321-3985 4 th -6 th Grade: 517- 321-1967 Child Care Office: 517- 321-6999	6:30am-School Bell School Bell-6:00pm *Early Release and no school day care is offered for an additional fee. FULL DAY HOURS: 6:30am-6:00pm

Transportation to and from Colt, Winans and Elmwood Elementary will be provided. (Exact time of departure TBD.)

For more information, visit the Waverly Community Schools website or contact Lacey Balzer (Child Care Supervisor) at lbalzer@waverlyk12.net or Hanna Sayles (Assistant Child Care Supervisor) hsayles@waverlyk12.net.

*Please keep this page for your records. *



Enrollment Process

Waverly Student Centers

Waverly Student Centers are combined at one location, East Intermediate School. The program will accept students from Kindergarten through 6th grade. Students will be bussed to their schools after the morning session and will be bussed to the Student Center after individual schools are dismissed.

- To enroll complete every page in the Student Centers Enrollment Packet. Please complete ONE packet PER CHILD. Paperwork is due a **MINIMUM** of 24 business hours before care is needed. (i.e. Paperwork turned in on Monday by 5:30pm will have a WEDNESDAY start date.) ***Once we are FULL, students will be placed on a WAITING LIST.***
- Include money order payment or completed Tuition Express form (available online or at East) to pay the registration fee of \$40 (\$25 per additional child) for the school year to complete the enrollment process.
- Complete a calendar for EACH month with the dates that your child will be attending circled. Changes with a minimum of 48 hours-notice can be made with written approval from the Supervisor or Assistant Supervisor.
- Turn the PACKET & CALENDARS (with registration payment) in to the Student Center located at East Intermediate School in the Community Center Room. (Entrance through outside door #14 before or after school.)

*Student Center Staff are available before and after school to accept enrollment packets.

For further questions contact Lacey Balzer (Child Care Supervisor) lbalzer@waverlyk12.net or Hanna Sayles (Assistant Child Care Supervisor) hsayles@waverlyk12.net.

*Please keep this page for your records. *

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Waverly Student Center Rates and Payment Schedule

2024/2025 School Year Registration Fees

- One Child: \$40
- Each Additional Child: \$25 (maximum family registration fee of \$90)
- 3 Day Minimum Requirement for scheduled weeks (regardless of attendance)

2024/2025 School Year Before and/or After School Rates

- Grades K-4:
 - \$10.00/am session (sibling rate: \$9.00/am session) 6:30 am-8:15 am*
 - \$12.00/pm session (sibling rate: \$11.50/pm session) 3:30* pm-6:00 pm
 - \$20.00/day (sibling rate: \$19.00) attends both before *and* after school
- Grades 5-6:
 - \$9.00/am session (sibling rate: \$8.00/am session) 6:30 am-7:15 am*
 - \$13.00/pm session (sibling rate: \$12.00/pm session) 2:30pm-6:00 pm*
 - \$20.00/day (sibling rate: \$19.00) attends both before *and* after school

***Exact time of school commencement and dismissal may vary by building**

***Waverly Student Center reserves the right to charge based on timeframe regardless of grade that student is in.**

Special Rates School Half Days

- Grades K-4:
 - \$30.00/day Half Day (sibling rate: \$27.00) (\$37/day if child attends before school and half day; sibling rate: \$33.00)
- Grades 5-6:
 - \$30.00/day Half Day (sibling rate: \$27.00) (\$37/day if child attends before school and half day; sibling rate: \$33.00)
- FEE FOR NO SHOW/CANCELLATION (without 24-hour notice): \$20/day

School Full Day Off Rates (I.e. Winter Break, Spring Break, PD days, Holidays)

- For all Grade Levels:
 - \$30/day Half Day (5 hours or less) (sibling rate: \$27.00)
 - \$45/day Full Day (sibling rate: \$37.00)
 - FEE FOR NO SHOW/CANCELLATION (without 24-hour notice): \$20/day

Emergency School Closings (including inclement weather, etc.) *Student Center will open 2 hours later than normal (8:30am) under discretion of the Superintendent. *

- For all Grade Levels:
 - \$30/day Half Day (5 hours or less) (sibling rate: \$27.00)
 - \$45/day Full Day (sibling rate: \$37.00)

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

Payment Schedule

- Complete a calendar for EACH month with the dates that your child will be attending Student Center circled. (Schedule is **REQUIRED** to facilitate student bussing to and from schools as well as to help us keep ratio compliance). Schedule will be required to guarantee a spot in the Student Center Program. **Changes in attendance will need to be approved 48 hours in advance by Lacey Balzer or Hanna Sayles.**
- Student Center requires a 3-day attendance minimum per week that your student is registered for. (i.e. Less than 3 days will be charged as 3 days.)
- We will **NOT** be able to accommodate “drop in” (unscheduled) care.
- Adjustments to schedules must be emailed a minimum of **48 hours in advance and approved by supervisor** to secure the child’s spot on the bus (I.e. My child needs to attend on Wednesday not the Thursday that was scheduled.) **CHANGES ARE AT SUPERVISOR DISCRETION.**
- **No Show Fees:** Early Release and No School Days: \$20/day if cancelation is not made with at least 24 hours written notice
- Attendance calendars are due upon enrollment.
- Payment for each week will be due by the Monday of the following week.
- A late fee of \$20.00 will be applied to accounts that are 2 weeks past due.
- Tuition may be paid via Tuition Express automatic withdrawal, Tuition Express online, attendance computer POS or by money order only at Student Center

Late Fees and Child Illness Guidelines

Late Tuition Payment:

I am aware that tuition payments are due by Monday following the week of attendance unless I have made arrangements in writing with Student Center Staff and that a late payment fee of \$20.00 will be applied to accounts that are 2 weeks past due. **Failure to make timely payments will result in my child being dis-enrolled from the program. If my child is dis-enrolled, I will have to pay an additional registration fee to re-enroll my child in the Student Center program.**

Late Pickup Fee:

I am aware that I must pay a late pick-up 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.

Child Illness Guidelines:

I understand that if my child becomes ill while in attendance at the Student Center, that staff will notify me in cases of minor accident or illness. In serious cases, 911 will be called and if the condition is judged serious enough, the child will be transported to one of the local hospitals by emergency vehicle for treatment and the parents will be called as soon as possible.

Child's Name _____

Parent/Guardian Signature/Date _____

Student Center K-6th School Year Paperwork 2024/2025

Date of Application: _____ Date you wish your child to begin: _____

CHILD'S

NAME _____ SCHOOL AND GRADE (2022/2023 School Year) _____

BIRTHDATE _____ GENDER: _____ PREFERRED PRONOUNS: _____

Parent/Guardian Information

Mother/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)

Father/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/Instagram and Website related to Waverly Community Schools Student Centers.

Please circle and initial:

Information/Promotions _____ Yes/No

Newsletters _____ Yes/No

Facebook _____ Yes/No

District Website _____ Yes/No

CHILD INFORMATION RECORD

State of Michigan - Department of Lifelong Education, Learning, and Potential - Child Care Licensing

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.

For Provider Use Only:		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 nd Phone (if applicable) ()	Home Address (if not child's address)	2 nd Phone (if applicable) ()
City	State	Zip Code	City State Zip Code
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? No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, explain: (Attach additional sheets, if necessary.)			

CCL-3731 (Rev. 6/7/2024) Previous editions 7-18, 4-21, & 3-22 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.	()
5.	()	6.	()

Parent/Legal Guardian Initials:

_____ I give permission to _____, licensed by the Department of Lifelong Education, Advancement, and Potential, 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

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.

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.



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.

-Confidential information will be reviewed only by Student Center staff. –

Child's Full Name: _____ Birthdate: _____

Nickname/Name your child prefers to be called: _____

Child's Preferred Pronouns: _____

Parent(s)/Guardian(s) Name

Mother/Guardian _____ Father/Guardian _____

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: _____

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

Other helpful information: _____



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:

- 1st Incident: Warning- Verbal/Written: Conversation with parent
- 2nd Incident: 1 Day Suspension
- 3rd Incident: 2 Day Suspension
- 4th Incident: 1 Week Suspension
- 5th Incident: Meeting with parent to discuss behavior plan/Potential removal from the program
- 6th 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: _____

Waverly Student Center Tuition:

- Complete a calendar for each month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools as well as help keep us in ratio compliance).
- Student Center requires a **3-day attendance minimum per week for weeks that your student is registered for.** (i.e. Less than 3 days will be charged as 3 days.)
- We will **NOT** be able to accommodate “drop in” (unscheduled) care.
- Payment for each week will be due by the Monday of the following week.
- A late fee of \$20.00 will be applied to accounts that are 2 weeks past due.
- **No Show Fees:** Early Release and No School Days: \$20/day if cancelation is not made with at least 24 hours written notice

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

Mother/Guardian Father/Guardian DHHS Other (please specify): _____

Parent Agreement (please initial each policy):

- _____ I agree to clock my child in and out each day of attendance
- _____ I agree to call or email the childcare site **48 hours** in advance to inform staff of a change in my child’s scheduled attendance
- No Show Fees:** Early Release and No School Days: \$20/day if cancelation is not made with at least 24 hours written notice
- _____ I understand that Student Center has a 3 Day Minimum Policy. If my child does not attend at least 3 scheduled days, I will be charged for 3 days on weeks that my student is registered for.
- _____ I understand that the child care program is a **nut-free** environment and I will ensure that no nut products are sent with my child for lunch 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 his/her behavior or health requires sending him/her 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.
- _____ **(SUMMER ONLY)** 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 ***
- _____ I understand that my child will ride a Waverly School District bus to school after Student Center morning attendance and from school to Student Center for afternoon attendance. I understand that my child will ride a Waverly School District bus for all Summer field trips. ***If your child is absent for school, they may not attend the after school program that day.***
- _____ I understand that it is my responsibility to notify the Student Center staff of any special need (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:

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 Waverly Student Center
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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.
- 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

K-6th Grade East Student Center Childcare Attendance Calendar

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Only one child per calendar. Calendars including information for more than one child will be returned.

Child's Name _____ School _____ Teacher/Grade _____

August 2024 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
			1	2
5	6	7	8	9 LAST DAY OF SUMMER PROGRAM
12 STUDENT CENTER CLOSED	13 STUDENT CENTER CLOSED	14 STUDENT CENTER CLOSED	15 STUDENT CENTER CLOSED	16 STUDENT CENTER CLOSED
19 STUDENT CENTER CLOSED	20 STUDENT CENTER CLOSED	21 FIRST DAY OF SCHOOL- EARLY RELEASE: STUDENT CENTER CLOSED	22 Before School After School	23 Before School After School
26 Before School After School	27 Before School After School	28 Before School After School	29 Before School After School	30 STUDENT CENTER CLOSED

- **Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools).**
- **Student Center requires a 3-day attendance minimum per week for regular rates.**
- **Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.**

K-6th Grade East Student Center Childcare Attendance Calendar

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Only one child per calendar. Calendars including information for more than one child will be returned.

Child's Name _____ School _____ Teacher/Grade _____

September 2024 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
2 STUDENT CENTER CLOSED	3 Before School After School	4 Before School After School	5 Before School After School	6 Before School After School
9 Before School After School	10 Before School After School	11 Before School After School	12 Before School After School	13 Before School After School
16 Before School After School	17 Before School After School	18 Before School After School	19 Before School After School	20 HALF DAY (less than 5 hours) FULL DAY
23 Before School After School	24 Before School After School	25 Before School After School	26 Before School After School	27 Before School After School
30 Before School After School				

- **Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools).**
- **Student Center requires a 3-day attendance minimum per week for regular rates.**
- **Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.**

K-6th Grade East Student Center Childcare Attendance Calendar

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Only one child per calendar. Calendars including information for more than one child will be returned.

Child's Name _____ School _____ Teacher/Grade _____

October 2024 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
	1 Before School After School	2 Before School After School	3 Before School After School	4 Before School After School
7 Before School After School	8 Before School After School	9 Before School After School	10 Before School After School	11 Before School After School
14 Before School After School	15 Before School After School	16 Before School AFTER SCHOOL: EARLY RELEASE	17 Before School AFTER SCHOOL: EARLY RELEASE	18 HALF DAY (less than 5 hours) FULL DAY
21 HALF DAY (less than 5 hours) FULL DAY	22 Before School After School	23 Before School After School	24 Before School After School	25 Before School After School
28 Before School After School	29 Before School After School	30 Before School After School	31 Before School After School	

- **Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools).**
- **Student Center requires a 3-day attendance minimum per week for regular rates.**
- **Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.**

K-6th Grade East Student Center Childcare Attendance Calendar

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Only one child per calendar. Calendars including information for more than one child will be returned.

Child's Name _____ School _____ Teacher/Grade _____

November 2024 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
				1 Before School After School
4 Before School After School	5 HALF DAY (less than 5 hours) FULL DAY ELECTION DAY	6 Before School After School	7 Before School After School	8 Before School After School
11 Before School After School	12 Before School After School	13 Before School After School	14 Before School After School	15 Before School After School
18 Before School After School	19 Before School After School	20 Before School After School	21 Before School After School	22 Before School After School
25 Before School After School	26 Before School After School	27 HALF DAY (less than 5 hours) FULL DAY	28 STUDENT CENTER CLOSED- THANKSGIVING	29 STUDENT CENTER CLOSED- THANKSGIVING

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

K-6th Grade East Student Center Childcare Attendance Calendar

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

Only one child per calendar. Calendars including information for more than one child will be returned.

Child's Name _____ School _____ Teacher/Grade _____

December 2024 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
2 Before School After School	3 Before School After School	4 Before School After School	5 Before School After School	6 Before School After School
9 Before School After School	10 Before School After School	11 Before School AFTER SCHOOL: EARLY RELEASE	12 Before School After School	13 Before School After School
16 Before School After School	17 Before School After School	18 Before School After School	19 Before School After School	20 Before School After School
23 HALF DAY (less than 5 hours) FULL DAY	24 STUDENT CENTER CLOSED: CHRISTMAS	25 STUDENT CENTER CLOSED: CHRISTMAS	26 STUDENT CENTER CLOSED: CHRISTMAS	27 HALF DAY (less than 5 hours) FULL DAY
30 HALF DAY (less than 5 hours) FULL DAY	31 STUDENT CENTER CLOSED: NEW YEAR	WINTER BREAK CARE WILL BE TENTATIVE DEPENDING ON HOW MANY STUDENTS ARE SCHEDULED.	IF NUMBERS ARE LOW, STUDENT CENTER MAY ADJUST HOURS FOR WINTER BREAK.	

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

K-6th Grade East Student Center Childcare Attendance Calendar

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net .

Only one child per calendar. Calendars including information for more than one child will be returned.

Child's Name _____ School _____ Teacher/Grade _____

January 2025 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
		1 STUDENT CENTER CLOSED: NEW YEAR	2 HALF DAY (less than 5 hours) FULL DAY	3 HALF DAY (less than 5 hours) FULL DAY
6 Before School After School	7 Before School After School	8 Before School After School	9 Before School After School	10 Before School After School
13 Before School After School	14 Before School After School	15 Before School After School	16 Before School After School	17 Before School AFTER SCHOOL: EARLY RELEASE
20 STUDENT CENTER CLOSED: MARTIN LUTHER KING JR. DAY	21 Before School After School	22 Before School After School	23 Before School After School	24 Before School After School
27 Before School After School	28 Before School After School	29 Before School After School	30 Before School After School	31 Before School After School

- **Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).**
- **Student Center requires a 3-day attendance minimum per week.**
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Child's Name _____ School _____ Teacher/Grade _____

February 2025 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
3 Before School After School	4 Before School After School	5 Before School AFTER SCHOOL: EARLY RELEASE	6 Before School After School	7 Before School After School
10 Before School After School	11 Before School After School	12 Before School After School	13 Before School After School	14 HALF DAY (less than 5 hours) FULL DAY
17 STUDENT CENTER CLOSED: PRESIDENT'S DAY	18 HALF DAY (less than 5 hours) FULL DAY	19 Before School After School	20 Before School After School	21 Before School After School
24 Before School After School	25 Before School After School	26 Before School After School	27 Before School After School	28 Before School After School

- **Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).**
- **Student Center requires a 3-day attendance minimum per week.**
- **Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.**

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Child's Name _____ School _____ Teacher/Grade _____

March 2025 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
3 Before School After School	4 Before School After School	5 Before School AFTER SCHOOL: EARLY RELEASE	6 Before School AFTER SCHOOL: EARLY RELEASE	7 HALF DAY (less than 5 hours) FULL DAY
10 Before School After School	11 Before School After School	12 Before School After School	13 Before School After School	14 Before School After School
17 Before School After School	18 Before School After School	19 Before School After School	20 Before School After School	21 HALF DAY (less than 5 hours) FULL DAY
24 HALF DAY (less than 5 hours) FULL DAY	25 HALF DAY (less than 5 hours) FULL DAY	26 HALF DAY (less than 5 hours) FULL DAY	27 HALF DAY (less than 5 hours) FULL DAY	28 HALF DAY (less than 5 hours) FULL DAY
31 Before School After School				

- **Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).**
- **Student Center requires a 3-day attendance minimum per week.**
- **Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.**

K-6th Grade East Student Center Childcare Attendance Calendar

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net .

Only one child per calendar. Calendars including information for more than one child will be returned.

Child's Name _____ School _____ Teacher/Grade _____

April 2025 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
	1 Before School After School	2 Before School After School	3 Before School After School	4 Before School After School
7 Before School After School	8 Before School After School	9 Before School AFTER SCHOOL: EARLY RELEASE	10 Before School After School	11 Before School After School
14 Before School After School	15 Before School After School	16 Before School After School	17 Before School After School	18 Before School After School
21 Before School After School	22 Before School After School	23 Before School After School	24 Before School After School	25 HALF DAY (less than 5 hours) FULL DAY
28 Before School After School	29 Before School After School	30 Before School After School		

- **Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).**
- **Student Center requires a 3-day attendance minimum per week.**
- **Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.**

K-6th Grade East Student Center Childcare Attendance Calendar

Directions for use: Circle the days/times you are planning to use the childcare program for each month. Submit this form to Student Center Staff on site or by email to lbalzer@waverlyk12.net or hsayles@waverlyk12.net.

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Child's Name _____ School _____ Teacher/Grade _____

May 2025 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
			1 Before School After School	2 Before School After School
5 Before School After School	6 Before School After School	7 Before School After School	8 Before School After School	9 Before School After School
12 Before School After School	13 Before School After School	14 Before School After School	15 Before School After School	16 Before School After School
19 Before School After School	20 Before School After School	21 Before School After School	22 Before School After School	23 STUDENT CENTER CLOSED: MEMORIAL DAY
26 STUDENT CENTER CLOSED: MEMORIAL DAY	27 Before School After School	28 Before School After School	29 Before School After School	30 Before School After School

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.

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Child's Name _____ School _____ Teacher/Grade _____

June 2025 (TENTATIVE)				
Monday	Tuesday	Wednesday	Thursday	Friday
2 Before School After School	3 Before School After School	4 Before School After School	5 Before School STUDENT CENTER CLOSED FOR PM SESSION: SUMMER SET UP	6 STUDENT CENTER CLOSED ALL DAY: LAST DAY OF SCHOOL: SUMMER SET UP
9 FIRST DAY OF SUMMER PROGRAM!	10	11	12	13
16	17	18	19 Juneteenth: Student Center CLOSED	20
23	24	25	26	27
30				

- Complete a calendar for the following month with the dates that your child will be attending Student Center circled. (Schedule is required to facilitate student bussing to and from schools and to help maintain proper child/staff ratio).
- Student Center requires a 3-day attendance minimum per week.
- Payment for each week will be due by the Monday of the following week. A \$20 late fee will be charged to account that are 2 weeks past due.