



## Extended Day Program

Welcome to our Extended Day Program (EDP)! We offer EDP to any registered student of St. Elizabeth. Children receive academic and recreational guidance during EDP. Time outside or walks around the campus may be a part of the program.

### **Hours:**

EDP is available mornings from 7:00am to 7:50am every school day, and afternoons from 3:00pm to 6:00pm on full-school days.

### **Drop-off and Pick-up:**

Children enter and exit the program through the EDP entrance, which is located next to the main office door.

Students enrolled in afternoon EDP may bring a peanut free snack.

### **Fees:**

Registration fee is \$25 per family.

Morning fee is a flat rate of \$5.00 per student, no matter what time a student arrives

Afternoon fee is \$8.00/hour for one child, \$12/hour for two children, \$15/hour for three children

Late fee: \$1.00 per minute after 6:00pm

### **Billing:**

Charges will be added to your FACTS account at the end of each month. Accounts must be current for children to attend EDP and Auto Pay must be turned on in your FACTS account for automatic billing each month.

### **Registration:**

To register for EDP, please complete the form below and return to the school office via fax or email. We will bill your FACTS account for the \$25 registration fee. Please complete the attached schedule as well. If your schedule is consistent, you need only complete the form once. If it changes weekly, please submit a new form the prior week so we can determine our staff needs.

## EDP Enrollment Form

Please complete the form below and return to the school office via fax or email. We will bill your FACTS account for the \$25 registration fee. **Please complete the Student Schedule as well.** If your schedule is consistent, you need only complete the form once. If it changes weekly, please submit a new form the prior week so we can determine our staff needs.

Student(s) Name(s):

Grade:

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Persons authorized to pick-up student(s):

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Allergies/medication: \_\_\_\_\_

Parent/Guardian Information:

\_\_\_\_\_  
Name/Relationship

\_\_\_\_\_  
Cell Phone Number/Work Phone Number

\_\_\_\_\_  
Name/Relationship

\_\_\_\_\_  
Cell Phone Number/Work Phone Number

Emergency Contacts:

\_\_\_\_\_  
Name/Relationship

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Name/Relationship

\_\_\_\_\_  
Phone Number

I DO \_\_\_\_\_ DO NOT \_\_\_\_\_ give permission for my child(ren) to go on area walks with the EDP staff.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Parent Email

## Extended Day Program Student Usage Schedule

\_\_\_\_\_ Fixed schedule (Will use EDP on the same days/times every week)

\_\_\_\_\_ Variable schedule (Please submit a new form the week or month before the schedule will change)

Week of \_\_\_\_\_

Month of \_\_\_\_\_

AM:

Student Name(s)	Monday drop-off time	Tuesday drop-off time	Wednesday drop-off time	Thursday drop-off time	Friday drop-off time

PM:

Student Name(s)	Monday pick-up time	Tuesday pick-up time	Wednesday pick-up time	Thursday pick-up time	Friday pick-up time