Hello PCS Families,

It is exciting to be a part of Portland Christian School as we celebrate 100 years of service to families seeking an excellent Christian education for their children!

One area of service we offer our families at PCS is Before and After School Supervision (BASS). For the upcoming 2023-2024 school year we are making some updates that may impact you and your students. These updates are listed below:

Before School: 7:00 - 7:30 AM

- Pre-Registration for Semester with a rolling deadline
 - Example: If sign up on Sep 15, you will pay for entire month of September
 - Example: Once you sign-up you are committed for the remainder of the semester (Fall or Spring)
- <u>Monthly</u>: \$100 per month per single student, \$200 per month per family
- <u>Daily Drop-Ins</u>: \$10 per single student, \$20 per family per day

After School: 3:45 - 6:00 PM

- Pre-Registration for Semester with a rolling deadline
 - Example: If sign up on Sep 15, you will pay for entire month of September
 - Example: Once you sign-up you are committed for the remainder of the semester (Fall or Spring)
- <u>Monthly</u>: \$200 perstudent, \$400 per month per family
- Daily Drop-Ins: \$15 per single student, \$30 per family per day
- After 6:00 PM pick up is \$10 every 15 minutes

Students will continue to enter the gym until 7:39 AM. At 7:40 AM Upper School (6-12) students will enter door #5 and Lower School (K-5) students will enter doors #6 or #7.

To register, please use the registration form below and return to Rose Istre.

If you have any questions, please don't hesitate to contact me!

Thank you,

Rose Istre 502-429-3727 rose.istre@portlandchristian.org



Last Name: _	First Name:						
Gender:	🗆 Female	🗆 Male	Grade:	Ag	ge:		
	Ple	ase check ye	our anticip	ated sup	ervision n	eed(s) belo	w:
Before Schoo	ol Supervision:	Yes No	D A	fter Scho	ool Superv	vision: Yes _	No
Mailing Addr	'ess:						-
City:		State/P	rovince:	Post	al/Zip Cod	le:	
Phone:							
Parent/Guard	dian email:						
Mother's Nar	ne:		Father's	Name: _			
Mother's Day	/time Phone: _		Fatl	ner's Day	time Pho	ne:	
Mother's cell	:		Fathei	's cell:			
Authorized person(s), including parent/legal guardian, MUST provide a school issued carpool							

tag or photo ID in order to pick up any child.

Please list the name of those who may pick up your child.

Name	Relationship to Student Phone Number

Other Dismissal Arrangements, please contact Rose Istre via email
Rose.Istre@portlandchristian.org, cell phone (502) 550-4468, or front office (502) 429-3727.

Emergency contact and relationship*: _____

Phone: _____

Specify any of your child's health concerns:	
Is your child on any medication? No Yes If so, please s	pecify:
AUTHORIZATION TO TREAT	
You have our permission, in the event of an emerge	ncy and in case we are unavailable, to
authorize any physician, nurse practitioner or medi	cal personnel to examine, interview, test
and if necessary, treat my child	as they may
deem advisable.	
Parent/Legal Guardian Name	Date
Parent/Legal Guardian Signature	Date
Student Allergies	
Student Medical Problems	
Doctor Phone numb	er
Insurance carrier Policy nun	nber
PARENT STATEMENT	
I hereby state that (student's name)	is in good mental
and physical health condition to participate in the g	eneral activities in PCS Before or After School
Supervision. I understand the behavioral expectatio	ns for my child. I further attest that the
information contained in this application is correct	to the best of my knowledge. In addition, I have
agreed to comply with the policy and fee statement	<u>.</u>

Parent Signature	Date
.	

Portland Christian School Before and After School Supervision Information

Snack: 4:15pm

Snacks will be provided to students each day at 4:15pm. Please be sure your student has a labeled, refillable water bottle with them each day.

Behavioral Expectations:

Love Jesus, Love Others

Respect for self, others and environment.

Following instructions.

Electronics use is permissible with the understanding of these limitations: the device screen may not be shared with other students and camera use is not allowed.

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Payments:

Payments will be directly made to PCS via FACTS. Questions regarding billing or payments should be directed to the Business Office.

For Questions, Information, or Other Dismissal Arrangements contact Rose Istre, School Counselor and Before and After School Supervision Director. Email: <u>rose.istre@portlandchristian.org</u> | Cell Phone: (502) 550-4468 | School Office: (502) 429-3727

I have read the above information as it pertains to Portland Christian School's Before and After School Supervision guidelines, expectations, times, and payment.

Signature: ___