



OSCEOLA CREEK MIDDLE SCHOOL



Before/After School Activities Registration Form

Before/After School Activities Director: Delores Mayes; delores.mayes@palmbeachschools.org
561-422-2512

Registration fee: \$75 (This one-time fee is required before a student begins the Before/After School Program.)
____ Before School Program (7:00-9:00am) Mon-Fri: 1st Qtr.= \$230 – 2nd Qtr.= \$195 – 3rd Qtr.= \$260 – 4th Qtr.= \$210
____ After School Program (4:05-5:15pm) Mon-Thurs: 1st Qtr.= \$62.50 – 2nd Qtr.= \$77.50 – 3rd Qtr.= \$105 – 4th Qtr.= \$85
(please note these fees are due before the start date of each 9 weeks (quarters))

PLEASE PAY ALL FEES ONLINE THROUGH "SCHOOLCASHONLINE.COM"

Failure to pay your child's Before/After School Program fees will result in suspension from the program.

Student Name: _____ Student number: _____
Home Phone: _____ Work Phone: _____
Address: _____

Parent/Guardian Names: _____
Parent Cell Phone Numbers: _____

Family Physician: _____ Phone: _____
Hospital Preference: _____

Persons authorized to remove your student from our program.
Name: _____ Phone: _____
Name: _____ Phone: _____

Contact person in case of an emergency: _____ Phone: _____

Do you grant permission to consult your family physician and/or send your child to the hospital emergency room in case of serious illness or accident? YES NO

Does your child have any allergies? YES NO If yes, please list them and describe typical reactions:

Does your child need any medication while in our program? YES NO
Does your child have any medical problems that you are aware of? YES NO
Please specify: _____
Insurance Company Name: _____
Policy Number: _____ Expiration Date: _____
Parent/Guardian Signature: _____ Date: _____

COMPLETE BOTH SIDES

Before/After School Program Registration Form

Please Complete and return to the BSAS Office, Rm. 1-124 with payment attached.

Before/After School Program Director: Delores Mayes 561-422-2512

Email address: delores.mayes@palmbeachschools.org

Late Pick-Up Policy

Parents: This form must be signed and returned before the student starts the Program.

The After School Program ends promptly at 5:15pm!

All students are expected to be picked up NO LATER than **5:20pm**

FRONTIER ELEMENTARY IS NOT AN OPTION!

NO STUDENTS WILL BE PERMITTED TO LEAVE OCMS CAMPUS TO WALK TO FRONTIER FOR PICK-UP.

Option # 1

A late fee will be charged after 5:20 for any student that remains on campus.

This fee MUST be paid before the student may return to the program.

Example:

5:21-5:25 = \$5

5:26-5:30 = \$10

5:31-5:35 = \$15

(...and so on.)

Option # 2

Give your permission now,

to have your child begin walking home at 5:15 if you are not here to pick them up.

Please indicate the route your child is to take so that you can meet them on the way.

Route: _____

Cell #: _____ Home #: _____

Option # 3

Ride the LOCAL Activity Bus.

PLEASE SIGN, CIRCLE AN OPTION, AND RETURN TO CONFIRM THE LATE PICK-UP POLICY.

Please indicate below, which option you choose for your child and discuss it with them.

PLEASE CIRCLE ONE and sign here: _____

Option # 1

Option # 2

Option # 3