**2016-2017 POLICIES AND PROCEDURES**

Dear Parents/Students,

Thank you for the opportunity to share a wonderful experience with your child through the 21st Century Community Learning Center’s LEAP After-School Program. This letter is intended to communicate the rules and guidelines of the LEAP program. We look forward to meeting you and your child. If you have any questions, please feel free to call 678-684-2688.

Objective: To work hand-in-hand with the of Walton County community to provide an after-school program in which children have the opportunity to learn, have fun in a positive and provide a safe environment. LEAP understands the benefits of growing in a well-rounded environment.

LEAP AFTER-SCHOOL POLICIES and PROCEDURES:

Check-in Procedure: Morning Care: If you are going to be utilizing the morning care program, which is from 7:00-8:00am, students will need to be walked in to the building by an adult. Parents/Guardians must sign students in each day for morning care. After-school: Each student will be checked in by the appropriate instructor. If a student is absent from LEAP, we cross check our list with the regular day absentee list. If the child is not on the absentee list, we check to see if there is a written notice from the parent regarding the student’s absence. If there is no written notice, the student is expected to attend the LEAP program.

Pick-Up: Each parent will need to enter the facility through the main entrance and sign in at the front desk. The person at the desk will call for the child. Each parent or guardian will sign their child out with the person at the front desk. If someone other than a parent is picking up a child, that person will be asked for a photo ID and must be on the student’s pick up list. **Students may be signed out in the office between 5:30 and 5:45. After 5:45 parents need to wait in the car rider line where students will be brought at LEAP dismissal.** If a child is not picked up by 6:15 and the school has not received a phone call to notify that the parent will be late, LEAP will attempt to contact the parents. If the parents cannot be reached, the emergency contacts will be tried. If no one can be reached and LEAP still has not been notified of late pick-up, the Department of Social Services will be called for further instruction.

Bus: Ensuring the safety of all after-school students is the number one priority of the LEAP program. Students will be expected to behave on the bus and will only receive one warning when it comes to bus misbehavior. Any further incident on the bus will result in suspension from the bus, and could result in the total loss of bus privileges. This is to ensure the safety of the driver, and all students transported on the bus.

Illness: LEAP reserves the right to release a child if he or she appears too ill to participate in the after-school program or is considered contagious. LEAP will notify the child’s parent or emergency contact and request that the child be picked up within a half hour. If the child has not been picked up within the allotted time, LEAP reserves the right to take any necessary action to ensure the health and safety of the child. If a child has a fever, the child is not permitted back to the program for 24 hours after the fever has subsided. Parents must inform LEAP within 24 hours or the next business day if the child or any member of the family has developed a reportable communicable disease. Life threatening diseases must be reported immediately.

Parent/Guardian Consent and Agreement: *In the event I cannot be reached in an emergency, I hereby give permission to the appropriate medical personnel, selected by the Director, to provide medical treatment deemed necessary by such personnel. Also my signature below signifies that I give permission for my child to be transported by the LEAP after-school Program if needed.*

*In consideration of the participant being permitted to enroll in the program, I hereby release, indemnify, and hold harmless LEAP, its employees, operators, counselors and instructors from any and all claims and demands, costs, charges, and expenses for harm, injury, damage, or loss which may be sustained by the participant as a result of or relating to participation in LEAP.*

I HAVE READ AND I UNDERSTAND THE ABOVE LIABILITY RELEASE.

Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**THIS FORM MUST BE RETURNED TO JUDY SANDERS (SITE COORDINATOR) WGES AFTER SCHOOL LEAP PROGRAM**

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