



**Joseph H. Firth Youth Center**  
 108 Anderson Street, Phillipsburg, NJ 08865  
 Phone: 908-454-7281 ♦ Fax: 908-454-8814

August 2018

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Dear Parent/Guardian:

Welcome back to a new and exciting school year! We are certainly looking forward to hosting countless programs at the Firth Youth Center this year and hope your child will participate! To make sure we have successful Before and After School Care Programs, and to also maintain our low fees, we ask you do the following:

- All children must be a Firth Youth Center Member for the 2018-2019 program year.
- Call the Firth Youth Center at 908-454-7281 if your child will not be attending. Please leave a message if no one answers. **This is for the safety of your child.**
- School scheduled half days are included. **Make sure to send a lunch on these days!**
- All Enrollment documents must be completed, turned in, and approved **prior** to your child starting.
- Holidays, snow days, delayed openings, and emergency closings are subject to change, please visit our website at [www.firthyouthcenter.com](http://www.firthyouthcenter.com) to verify if we will be open on these days. We will make every effort to open on emergency school closures but need to keep our staff's safety in mind as well.
- Transportation arrangements are the parent's responsibility. Before School Care will walk to PES with staff.
- Our program ends at 6pm. A late pickup fee will apply and is outlined in Enrollment & Payment Agreement.
- Failure to adhere to Firth Youth Center Policies or Code of Conduct will result in removal from program.
- Pricing is listed below. Depending on need, scholarships and subsidy may be available.

<b>After School Care</b> Grades 2 <sup>nd</sup> -8 <sup>th</sup>	<b>2:45-6:00PM</b> <b>12:00-6:00PM (on scheduled half days)</b>	<b>\$140/Month</b>
<b>Before School Care</b> Grades 3 <sup>rd</sup> -5 <sup>th</sup>	<b>7:00-8:30AM</b> <b>Students will be escorted to PES by staff</b>	<b>\$150/Month</b>
<b>Before &amp; After School Care Bundle</b> Grades 3 <sup>rd</sup> -5 <sup>th</sup>	<b>7:00-8:30AM</b> <b>2:45-6:00PM</b> <b>12:00-6:00PM (on PES scheduled half days)</b>	<b>\$270/Month</b>

Should you have any questions regarding our program, please feel free to contact Meghan Santowasso or Kelly Post-Sheedy at your convenience. Again, we look forward to a great year and thank you for choosing the Joseph H. Firth Youth Center for your childcare needs.

Sincerely,

*Kelly Post-Sheedy*

Executive Director

*Meghan Santowasso*

Program Director



# Before and/or After School Care Enrollment & Payment Agreement

1. **Enrollment:** I am enrolling my child \_\_\_\_\_ (First & Last Name) into the Firth Youth Center School Closure and/or Half Day Programs for the 2018-2019 School Year. If I am carrying a balance from the previous school year and/or summer, I will remit payment in full before my child is enrolled for the upcoming school year. Failure to do so will result in a loss of my child's program spot for the 2018-2019 school year.
2. **Membership:** I understand I must complete the Membership Form and pay the Annual Membership Fee (\$15) for my child to enroll in any Firth Youth Center Programs, including School Closure and/or Half Day Programs.
3. **Registration:** I understand my Emergency Contact/Parental Consent Form must be received with payment one-week prior to the start of any program to enroll on time. If starting within the school year, I understand I must receive notice from Administrative Staff that my child can attend, prior to starting.
4. **Monthly Payment:** I am responsible for monthly payment to be made by the first day of each month for services to be rendered. I understand that if my payment is received late, a late fee of \$15 will be billed to my account. Payment is listed below. Failure to make any payment may jeopardize by child's spots and will result in temporary suspension or termination.

Month of Care	Payment Due Date
September 2018	September 1 <sup>st</sup>
October 2018	October 1 <sup>st</sup>
November 2018	November 1 <sup>st</sup>
December 2018	December 1 <sup>st</sup>
January 2019	January 1 <sup>st</sup>
February 2019	February 1 <sup>st</sup>
March 2019	March 1 <sup>st</sup>
April 2019	April 1 <sup>st</sup>
May 2019	May 1 <sup>st</sup>
June 2019	June 1 <sup>st</sup>

5. **Returned Checks:** There is a \$30.00 processing fee for a returned check. If returning to the program, families must then submit payment by cash or money order at the office for the remainder of the program year.
6. **Payment Responsibility:** I am responsible for my child's full tuition payment regardless of illness, vacation, or differences in school calendar.
7. **Late Pick-Up:** Parents picking up their child after dismissal time will be charged \$1.00 for every minute they are late. I understand that these fines are billed directly to me and are payable upon receipt of the bill. Repeat lateness may result in dismissal from the program.
8. **Changes in Contact Information:** I will notify the Administrative Office if any work, cell, or home phone number changes for myself or emergency contacts. I will provide two phone numbers to be reached at in case of an emergency for the on-site staff.
9. **Inclement Weather:** I understand that there may not be programs on days the school district closes and/or if the school closes early due to bad weather. I have reviewed this information with my child and know it is my responsibility to find out if the Firth Youth Center will be open during winter weather.
10. **Medical Emergency:** If a medical emergency arises, the staff will first attempt to contact me. If I or the emergency contacts cannot be reached, staff will call 9-1-1 if the emergency is such that immediate medical attention is necessary.
11. **Lost Items:** I understand that the Firth Youth Center is not responsible for items my child brings to the facility. It is strongly discouraged to bring items of value, such as cell phones or money to the facility. Lockers are available in the Locker Room and children are welcome to bring a lock to secure belongings. Under no circumstances are staff to be held responsible for your child's belongings.

Failure to comply is a breach of contract and will jeopardize my child's spot in the program. I accept the terms above per my signature.

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

Date: \_\_\_\_\_

# Before and/or After School Care Standard Payment Policy



Please note the following policies regarding Before and After School Care payment:

- All Before/After School Care payments are due prior to the first of the month unless specific arrangements are approved in advance by the Executive Director.
- All registrations must be done at the office. Packets will **not** be accepted by counselors.
- After one (1) returned check, all payments must be made in cash or by money order in advance.
- Any alternate payment arrangements must be made at the office in advance.
- Program staff are not allowed to handle registration fees. Should it become necessary to make a payment when the office is not open, it must be in a sealed envelope and placed in the black mailbox outside the office door. There must be clear information about the payment: Name of child, what is being paid, etc. The Center and staff will not be responsible for lost payments when made outside of office hours.
- We do not accept debit or credit cards.
- Refunds will be made for medical reasons only and will carry a \$15 handling fee. A doctor's excuse will be required.

<b>Late payment fee:</b>	<b>\$15.00</b>
<b>Returned check fee:</b>	<b>\$30.00</b>

Failure to follow policies may result in the child being unable to attend the Before and/or After School Programs.

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

Date: \_\_\_\_\_

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## Subsidized Child Care Payment Policy

The following policies are additional for our Subsidized Care E-Child clients:

- I (or my authorized pick up or drop-off person) will SWIPE my child in/out every day on the POS machine. I will continue to sign my child in and out every day and record the time of drop off and pick up on the Sign-out sheets.
  - I will be current with swiping as of 4:00pm on Thursday of each week.
- If I lose my card, I will contact Norwescap immediately. If I do not have my card within 7 days, then my child(ren) cannot participate in the program or I may be charged the full rate.
- If myself or my child(ren) is sick or has a scheduled doctor's appointment, I will swipe or call out my child SICK that day. If my child has an unexcused Absence, I will swipe or call out my child ABSENT that day.
- If I fail to swipe my child(ren)'s attendance for five (5) days, my childcare services will be suspended until all days attendance are swiped and up to date.
- Any day(s) of which the Firth Youth Center is not paid due to missing swipes or swiping incorrectly, I understand that the Joseph H. Firth Youth Center will charge me those unpaid fees.
- All co-pays must be current as of the first of the month.
- Late payment fees may be applied to late co-payments unless prior arrangements are approved by the office in advance. Every effort will be made to work with our clients.
- I understand the Sanction Policy set forth by the State of New Jersey and that if I fail or refuse to swipe, I will be required to attend a training provided by Norwescap within two weeks. If I do not comply with this, the State of New Jersey will suspend my child care subsidy according to their sanction policy.
- I understand the above policy and procedures set by the Joseph H. Firth Youth Center and I will adhere to them.
- I understand all other sections of the Center's Standard Payment Policy apply.

Failure to follow policies may result in the child being unable to attend the Before and/or After School Program.

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

Date: \_\_\_\_\_