

SMOM Stay and Play Information

2023-2024

Stay and Play is St. Mary Our Mother School's after school care program. Stay and Play is open to SMOM students on school days from **2:45 pm – 6:00 pm**. Stay and Play closes **promptly** at 6:00 pm. A late fee will be charged for pick-ups after 6:00 pm. Stay and Play is **not** in session on **days off** from school or if **Horseheads District After- School Activities** are cancelled due to weather conditions.

To contact Stay and Play after 3:00pm – call (607) 481-9840. SNP phone is only in use from 3:00PM-6:00PM. Any inquires outside of that time period should be directed to the school office.

Pick Up: The school is locked at all times of the day for security purposes. Each family utilizing the Stay and Play program must obtain at least one security fob to gain access to the building between the hours of 3:00 and 6:00PM. The fob(s) must be obtained and activated at least 24 hours in advance of using the Stay and Play Program. Contact the school office for detailed information and fob activation.

NOTE: There is a \$10.00 deposit for each FOB.

Yearly registration fee for SNP, payable at registration, is \$25 a family. Check is payable to SMOMS (St. Mary Our Mother School). This is not billed through FACTS & must be paid yearly.

Daily fees for SNP is \$15 per student. These fees include two snacks, material costs & activities, and staffing.

Late Fee for SNP can be viewed below –

- ❖ Children picked up between 6:00pm – 6:15pm will be charged an additional \$15.00 late fee.
- ❖ Children picked up after 6:15pm will be charged an additional \$30.00 late fee.

Financial Information: The daily Stay and Play billing is done through FACTS Management System. Questions should be addressed with Kathy Warner, Business Manager (739-3817). Prompt payment is expected to keep SNP available to your child (ren).

Stay and Play is offered to all St. Mary Our Mother students. However, we do have a code of conduct that must be adhered to by students. Should a student **consistently not meet behavioral expectations** there are consequences. A meeting will be scheduled with the student & their parents with the Principal to determine the level of consequence. This could include suspension from SNP or expulsion from the program completely. These measures are done to ensure the safety and enjoyment of all Stay and Play students.

Homework will be done each day in O'Brien Hall. There will be a dedicated hour (2:45-3:45) of quiet time during which students will complete homework. First snack will be served during this time.

We are permitting SNP students to bring a personal electronic device to SNP. They will be allowed to use them only during specifically directed times. They will not be using them for the entirety of SNP. No other student will be allowed to handle another's property. Be aware that you will be sending these items in at your own risk.

Behavior Code:

Students are to show respect to fellow students and staff at all times, in words and in actions.

Students are expected to be inclusive of others.

Students should always use language appropriate to school.

Students should refrain from responding physically to others in a negative way.

Stay and Play Registration 2023-2024

Family Name: _____

Parent's (Guardian) Names: _____

Students Attending & Grade Level: _____

Emergency Contact Numbers

Name & Number:

1. _____

2. _____

3. _____

4. _____

People Authorized to Pick Up Your Child(ren)

1. _____

2. _____

3. _____

4. _____

5. _____

*** Those listed should be prepared to show
valid identification, if asked.**

Please indicate the days you anticipate your child(ren) to attend Stay & Play during the 2023-2024 school year. This information will help us ensure the appropriate staffing support for each day.

Monday _____

Thursday _____

Tuesday _____

Friday _____

Wednesday _____

every day of the week _____

EMERGENCY MEDICAL SITUATION CONSENT:

In the event of a critical medical emergency, the staff of Stay and Play has my permission to phone 911 and if necessary, send the child by ambulance to the nearest medical facility. The emergency physician has my permission to render emergency care.

Parent Signature: _____ Date: _____

BEHAVIOR CODE ACKNOWLEDGEMENT:

I have read the attached Behavior expectations and will abide by them.

Parent Signature: _____

Student Signature(s): _____