



Rush-Henrietta Central School District

www.rhnet.org

February 1, 2017

Dear Parent or Guardian,

Welcome to the Cub Care Zone (C²Z)!



During this online transaction, make sure to register each child you wish to enroll in C²Z by making your \$20 per child, non-refundable registration fee. Register each child for the school they will be attending during the 2017-2018 school year.

This enrollment packet must be completed and returned during a scheduled orientation appointment with the C²Z staff. Complete these online, fillable PDF forms, print your final version, and bring it to your scheduled appointment.

To schedule your appointment, call the Continuing Education office at 359-7805. The following times are available:

Tuesday, March 14, 2017: a 15-minute appointment between 5 and 8 p.m.

OR

Thursday, March 30, 2017: a 15-minute appointment between 5 and 8 p.m.

OR

Saturday, April 8, 2017: a 15-minute appointment between 9 a.m. and noon.

In addition to turning in your completed enrollment packet, you will be required to make your first month's payment at your appointment. We accept MasterCard, Visa, check, or cash. After this first payment, you will be able to manage your payments online; instructions will be provided to you during your scheduled appointment.

Call 359-7805 today to make your appointment!

Sincerely,

Bonnie Coddington, Continuing Education Coordinator

Pearl Tokar, C²Z Coordinator

For your use

My appointment is scheduled for:

Date: _____

Time: _____

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2017-2018 Parent Handbook





Welcome to Rush-Henrietta Cub Care Zone, also known as C²Z! Thank you for registering your child in our program. Our goal is to provide quality care for Rush-Henrietta students in grades K-6. This care will be provided in a positive, caring environment before and after school and on non-school days during the school year, as well as during the summer.

We are committed to encouraging students to participate in activities designed to promote social-emotional development, academic enrichment, and physical activity. We are also committed to fostering a positive relationship with you to create an effective and beneficial environment for all participants in the program. Please read this parent handbook thoroughly in order to help prepare your child for participation in C²Z.

Pearl Tokar, C²Z Program Coordinator
Carlton O. Webster Building
2000 Lehigh Station Road
Henrietta, NY 14467
(585) 359-7912 or (585) 613-2202

Bonnie Coddington, C²Z Registration Coordinator
Office of Continuing Education
Rush-Henrietta Senior High School
1799 Lehigh Station Road
Henrietta, NY 14467
(585) 359-7805

C²Z PROGRAM SITES, PHONE NUMBERS, HOURS

Crane Elementary School 85 Shell Edge Drive C ² Z phone: (585) 353-0556 C ² Z hours: 6:30 to 7:40 a.m. and 2 to 6 p.m. Main office: (585) 359-5400 School hours: 7:45 a.m. to 2 p.m.	Fyle Elementary School 133 Vollmer Parkway C ² Z phone: (585) 353-2106 C ² Z hours: 6:30 to 7:40 a.m. and 2 to 6 p.m. Main office: (585) 359-5430 School hours: 7:45 a.m. to 2 p.m.
Leary Elementary School 5509 E. Henrietta Road C ² Z phone: (585) 353-2324 C ² Z hours: 6:30 to 7:40 a.m. and 2 to 6 p.m. Main office: (585) 359-5460 School hours: 7:45 a.m. to 2 p.m.	Winslow Elementary School 755 Pinnacle Road C ² Z phone: (585) 353-1016 C ² Z hours: 6:30 to 7:40 a.m. and 2 to 6 p.m. Main office: (585) 359-5090 School hours: 7:45 a.m. to 2 p.m.
Sherman Elementary School 50 Authors Avenue C ² Z phone: (585) 353-2897 C ² Z hours: 6:30 to 9:15 a.m. and 3:35 to 6 p.m. Main office: (585) 359-5490 School hours: 9:20 a.m. to 3:35 p.m.	Vollmer Elementary School 150 Telephone Road C ² Z phone: (585) 353-2938 C ² Z hours: 6:30 to 9:15 a.m. and 3:35 to 6 p.m. Main office: (585) 359-5520 School hours: 9:20 a.m. to 3:35 p.m.
Webster Building <i>(formerly known as the Ninth Grade Academy)</i> 2000 Lehigh Station Road C ² Z phone: (585) 465-0119 C ² Z hours: 6:30 a.m. to 6 p.m. on specified non-school days Main office: (585) 359-5550	

Note: The site phones are turned on during program hours ONLY. Calls prior to program hours can be directed to the C²Z office at (585) 359-7912. During program hours, please call only when necessary so our staff can focus on the needs of the children.

HOLIDAYS

All program sites will be closed for the following legal holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day and the day after, and Christmas Day.

C²Z REGISTRATION, FEES

REGISTRATION

The registration fee is \$20 per child per year for all C²Z programs and is due at the time of registration. Space will be reserved in the program only with payment of this non-refundable fee. If for any reason your child leaves the program and needs to return, you will need to re-register and pay a new \$20 registration fee.

ENROLLMENT FEES

Enrollment fees are based on the number of days your child will attend in the program. Fee must be paid for all days that the child is enrolled even if the child is absent from the program. There are no sick days. Enrollment in the program will be completed upon submission of the enrollment packet after registration, and upon receipt of the first month payment.

PAYMENTS

All payments are made through the Rush-Henrietta Office of Continuing Education. Cash, checks (payable to Rush-Henrietta Schools), or the preferred method of a credit card (MasterCard or Visa) are acceptable forms of payment. Online payments are available and preferred. For your convenience, credit card information may also be called into the Office of Continuing Education at (585) 359-7805 between the hours of 9 a.m. and 3:30 p.m. Monday through Friday. **Please include the child's first and last name and school with each payment.**

LATE-PAYMENT PENALTY

A \$20 late charge will be added for each month's late payment. The Rush-Henrietta Central School District reserves the right to discontinue services to any family that is in arrears.

RETURNED CHECK CHARGE

There will be a \$20 charge for any check returned for insufficient funds. In the event of a returned check, this fee may only be paid by cash or credit card.

REFUND POLICY

Parents/guardians who withdraw their child from the program according to the program withdrawal timeframe, will receive a refund for paid services after the established last day of attendance. You will be charged a \$20 processing fee.

C²Z PROGRAM INFORMATION

ACTIVITIES

Our staff will schedule a variety of age-appropriate activities and support for the children during program hours. Activities and support include but are not limited to:

- * **Homework support:** Students will be provided support for daily homework assignments.
- * **Indoor-outdoor recreation/sports activities:** Students will be provided a variety of physical activities and games to support their overall physical and mental well-being.
- * **Reading:** Students will have opportunities to engage in group readings and discussions of age-appropriate books.
- * **Enrichment activities:** Students will have opportunities to participate in fun activities and skills, such as cooking, arts and crafts, STEM projects, group games, community service projects, etc.

ADVISORY COUNCIL

The program has an Advisory Council that meets five times per year. Parents are welcome to join us at these meetings. For more information, contact the C²Z office or visit the district website.

AFTER-SCHOOL ARRIVAL

A staff member will escort your child to the program to be signed in.

AS-NEEDED CARE

For your convenience, care is also available before and after school for unexpected personal needs. To be eligible for as-needed care, you must register for C²Z, pay the \$20 registration fee, and complete the enrollment packet. Before-school care must be arranged no later than 11 a.m. one business day prior to the date needed. After-school care must be arranged by 11 a.m. on the day service is needed. The charge for this as-needed care will be \$20 per day, per child, and must be paid at the time of your request. Frequent requests for this option will not be accepted. After multiple requests, you will be required to enroll fully in the program.

BREAKFAST

A child participating in before-school care will be able to access the school breakfast program for a fee. The free and reduced rate will be applied for those who qualify. A breakfast from home also may be sent in with the child.

C²Z PROGRAM INFORMATION (con't)

DISCIPLINE PROCESS

- * First offense: Warning will be issued and child may be removed from an activity for a designated length of time.
- * Second offense: Warning will be issued, child may be removed from an activity, and a parent will be notified.
- * If behavior persists, the child may be suspended from the program for one day OR one week OR remainder of program
- * For the safety of **all** children, bullying and physical contact **WILL NOT BE TOLERATED** and may lead to immediate suspension or dismissal.

EMERGENCY CLOSINGS

The C²Z program will only be closed when an inclement weather day is declared and all Rush-Henrietta schools are closed. The program will remain open even if the Rush-Henrietta Central School District cancels after-school activities due to weather-related conditions. We ask that you exercise due diligence in picking up your child as soon as possible from the program.

EVACUATION

At times, it may be necessary for us to evacuate from the school building. If this is the case, a sign will be posted on the door of the building, a parent alert may be posted on the district website, and the parents/guardians may be called.

HEALTH CONCERNS

Our program staff is trained to administer EpiPens, Benadryl, and inhalers. If your child needs other medication, you will need to make arrangements for the school nurse to administer the medication at the end of the school day. We do not have access to medications/medical records used during the school day.

If a student becomes ill or gets hurt during the program hours, a parent, guardian, or other authorized person will be contacted to pick up the child. In the event of a serious medical emergency or a student safety issue, 911 will be called first and the parent or guardian will be informed immediately.

C²Z PROGRAM INFORMATION (con't)

NEWSLETTER

Monthly newsletters will be provided to parents and guardians at the beginning of each month to keep you informed of pertinent information about the program.

PERSONAL ITEMS

We recommend that a child refrains from bringing personal toys, electronic devices and/or computing devices to the program. **We are not responsible for lost, stolen, damaged or broken items.**

PICK-UP

At the end of each program day, a child will only be released to his or her parent or guardian or other authorized individuals. Proper identification will be required.

SNACK

A daily snack will be provided to students when they arrive to the program after school. On non-school days, afternoon snack is also provided. If a child has a specific food allergy or dietary need, please pack the child a snack from home to be eaten during that time.

SPECIAL NEEDS

Our program serves some children with special needs, but please be aware we are not a special-needs program. Children enrolled in our program must be able to function independently within our structure and be able to transition in and out of activities several times during program hours. If a child requires one-on-one support, attention, or a small, contained environment, we are not able to provide such accommodations. If your child is enrolled in the program and these issues arise, you will be advised to make other arrangements for your child's care.

STAFFING

The program student-to-staff ratio is 10:1. Program staff includes certified teachers, teacher aides, and college students. Each C²Z staff member has had reference checks, fingerprinting, and a New York state background screening as required by the New York State Education Department. Additionally, all program staff is trained in CPR/AED and first aid. Program staff members are also mandated reporters, which means if they suspect child abuse or neglect, they are required by law to report it immediately.

C²Z PARENT/GUARDIAN EXPECTATIONS

ABSENCES

You must notify the C²Z office at (585) 359-7912 any time your child will be absent from the program.

DESIGNATED PICK-UP LIST

Parents/guardians or authorized individuals must sign out their children daily. Children will only be released to adults (at least 16 years of age) designated on the Enrollment Form. Staff will request proper identification before releasing a child. If you need to make arrangements in an emergency situation for someone different to pick up your child, you must call the C²Z office in advance. A parent or guardian must add that person to the Enrollment Form as soon as possible.

DISCUSSING CONCERNS

Parents/guardians are encouraged to discuss immediate program and health concerns, custody issues or any other needs of their child right away with a site supervisor. Information will be kept confidential and will only be shared on a need-to-know basis.

EMERGENCY SCHEDULE CHANGE

When there is a schedule change, notify both the C²Z program and your child's school in writing or by a phone call and please provide 24 hours' notice, when possible.

LATE PICK-UP

Closing time will be strictly observed. A \$20 late charge will be assessed for the first 15 minutes, or any part of, that a child is picked up after 6 p.m. After 6:15 p.m., the charge is an additional \$10 for every five minutes. Chronic offenders may be asked to leave the program. If parents/guardians anticipate they will be late, they must call the program site. Site phone numbers are listed in the Parent Handbook.

MORNING ARRIVAL

A parent or guardian must sign each child in at the before-school care program at the child's school.

C²Z PARENT/GUARDIAN EXPECTATIONS (con't)

SCHOOL AND TRANSPORTATION NOTIFICATION

It is required that a Transportation Request Form is completed and given to your child's school prior to attending the C²Z program. Additionally, you must send a written note to your child's teacher on the first day of school to inform him/her of your child's care schedule.

SICKNESS

If your child is absent from school due to illness, he/she may not attend the program that day. Children who become ill while attending the program will be made comfortable until parents can pick them up. There are no sick days, and payment is required even if children are absent due to illness.

WITHDRAWAL

Parents/guardians must provide two weeks' advanced notice in writing when withdrawing their child from the program or reducing their schedule. Parents must pay for the full two weeks whether or not the child attends.

C²Z PARTICIPANT EXPECTATIONS

All children participating in the program are expected to follow the Rush-Henrietta Central School District Code of Conduct. Children will be expected to follow directions of program staff at all times in a respectful, positive manner; use appropriate language; avoid physical and verbal harassment and bullying behaviors; and refrain from any conduct that endangers the safety, physical or mental health, or welfare of others. See prohibited student conduct on pages 8-14 of the Code of Conduct for detailed information.

Families and children failing to follow expectations/policies/procedures as outlined in this handbook may be dismissed. The program has the right to dismiss your child immediately under severe circumstances.

ATTIRE

During program hours, the district's Code of Conduct is in effect. We follow the dress code outlined in the Code of Conduct at all times. It is expected that all children will wear appropriate attire and footwear. Tank tops, sandals, or heelies are not permitted for safety reasons. During the summer and on non-school days, send the children to the program in play clothes, along with sneakers.

BEHAVIORAL EXPECTATIONS

Participants are expected to:

- report directly to the program and check in with staff members.
- put belongings in the assigned area and follow program procedures.
- view quiet time as a good time to do homework; remain quiet even if homework is completed.
- walk in the cafeteria or hallways and use a respectful voice.
- stay in areas that are designated and supervised by the program staff.
- be respectful and listen to staff members.
- treat others in the program with the same respect that I would like them to use with me.
- refrain from bullying or using physical force with others.
- be respectful of items belonging to others, as well as school property and program supplies.
- practice good sportsmanship at all times.
- wear sneakers in the gym.



2017-2018 PARENT/GUARDIAN AGREEMENT

By signing below, I, _____, acknowledge/agree to the following:

- 1) I have read the C²Z Parent Handbook.
- 2) I understand the registration/payment structure and the consequences of delinquent payment.
- 3) I understand that my failure to comply with the parent/guardian expectations of the C²Z program may result in the termination of services to my child.
- 4) I understand that my child's failure to comply with the participant expectations of the C²Z program may result in the termination of services to my child.

Parent/Guardian Signature (handwritten signature required)

Date



ENROLLMENT FORM

Child's Information

Child's Name: (Last) _____ (First) _____ (Middle Initial) _____

Date of Birth: _____ Gender: _____ School: _____ Grade: _____

Address: _____ Zip: _____

Phone (Primary): _____ Phone (Secondary): _____

1) Parent/Guardian Name: _____ Relationship: _____

Day Phone: _____ Cell: _____

Work Phone: _____ Workplace: _____

2) Parent/Guardian Name: _____ Relationship: _____

Address (if different): _____ Zip: _____

Day Phone: _____ Cell: _____

Work Phone: _____ Workplace: _____

Emergency Contact (other than parent/guardian): **Please list in the order you would like them contacted.*

1) Name: _____ Relationship: _____

Address: _____ Phone: _____

2) Name: _____ Relationship: _____

Address: _____ Phone: _____

3) Name: _____ Relationship: _____

Address: _____ Phone: _____

Schedule:

Select before-school, after-school or both, as well as days of care during which your child will be enrolled.
A minimum of 3 days is required.

☐ Before-School Care Days attending: (select all that apply) ☐ M ☐ T ☐ W ☐ Th ☐ F

☐ After-School Care Days attending: (select all that apply) ☐ M ☐ T ☐ W ☐ Th ☐ F

Designated Pick-Up List:

**Please inform those listed below to have photo identification available at the time of pick-up. Persons listed must be at least 16 years of age.*

<i>Name</i>	<i>Phone</i>	<i>Relationship</i>

Health Information:

Does your child have allergies, health concerns, or special needs we need to be aware of? ☐ Yes ☐ No

If yes, please provide details below:

Please list any medication(s) your child is currently taking:

Doctor: _____ Phone: _____

Address: _____

Dentist: _____ Phone: _____

Address: _____

Preferred Hospital: _____

Photo Consent

Photos or videotapes may be taken of your child for program keepsakes or Rush-Henrietta Central School District publicity. Please indicate whether you give your permission by checking and initialing your choice (*handwritten initials required*).

☐ Yes _____ ☐ No _____

Topical Ointment Applications

You may send in sunscreen and/or insect repellent with your child. Please indicate below that your child has your permission to use it. Please indicate which applications your child may use. By initialing you are also indicating that the staff may assist your child when needed. (*handwritten initials required*). ☐ Sunscreen _____ ☐ Insect Repellent _____

Walking Trip Consent

Staff may sometimes take the children on short walks in the neighborhoods surrounding the program site. Please initial below if your child has your permission to participate in this (*handwritten initials required*). ☐ Yes _____ ☐ No _____

Medical Consent

In case of an accident or injury in which I - or person (s) designated above - cannot be reached, I agree that emergency medical care, dental treatment, and/or emergency transportation may be given. I agree to pay for all medical expenses incurred on my child's behalf.

Parent/Guardian Signature (handwritten signature required)

Date



PARTICIPANT INFORMATION SHEET (confidential)

C²Z staff members will use the information you provide to create an individualized experience for your child. All information you provide will be kept confidential and is to be used only as a means of meeting your child's needs.

Child's Name _____

Address _____ Zip _____

Phone (Primary) _____ Phone (Secondary) _____

Age _____ School _____ Grade _____

List your child's siblings:

Name: _____ Age _____ Gender _____ School _____ Grade _____

Name: _____ Age _____ Gender _____ School _____ Grade _____

Name: _____ Age _____ Gender _____ School _____ Grade _____

Parents are: ___ Married ___ Separated ___ Divorced ___ Widowed ___ Other _____

Child lives with: ___ Mom ___ Dad ___ Step-parent(s) ___ Grandparents ___ Other _____
(select all that apply)

Are there special family relationships, including custody/visitation, that staff should be aware of? ☐ Yes ☐ No

If yes, please explain:

Does your child have any special health care needs? ☐ Yes ☐ No

If yes, please explain:

Does your child have an Individualized Educational Plan? ☐ Yes ☐ No

(If yes, please note that we may need to request a copy of the IEP from you.)

Does your child have any special needs for which he/she has received or is receiving therapy or treatment? ☐ Yes ☐ No
If yes, please explain:

Are there situation at home we should be aware of (moving, school, changes in family, etc.)? ☐ Yes ☐ No
If yes, please explain:

How does your child feel about attending C²Z this year?

What are your child’s hobbies? Does he/she participate in any extracurricular activities?

How does your child relate to his/her peers?

How would you describe your child to someone who has never met him or her?

What methods work best with your child if they are upset or angry?

If there is any other information you wish to share with us, please use the space below.



CREDIT CARD AUTHORIZATION FORM

I, _____ parent/guardian of _____ authorize Rush-Henrietta Central School District to charge the credit card listed below each month for my child's participation in Cub Care Zone for the 2017-2018 school year.

I understand that all payments will be made between the 1st and the 7th of the month prior to the month of care being provided (example: October payment will be charged to your account between September 1 and September 7).

Method of Payment (select one): ☐ Visa ☐ MasterCard

Credit Card #:

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--	--	--	--

Expiration Date (MM/YY):

--	--

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CVC# (3-digit code from back of card):

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Print Card Holder Name: _____

Billing Address on Account: _____

Card Holder Signature: _____
(handwritten signature required)

Date: _____

**Transportation Department**

1133 Lehigh Station Road ~ Henrietta, NY 14467

Phone: 585-359-5370

School Year

2017/2018**TRANSPORTATION REQUEST FORM - TO BABYSITTER OR CHILD CARE****STUDENT INFORMATION** For families with multiple students, a form for each student in the family is required.

School Name

Date of Request

Student First, Last Name

Home Address

Grade (current year)

REQUEST FOR CARE

Please note that arrangements must be consistent weekly, with a maximum of two pick-up and two drop-off points during the week.

Start Date : _____ All requests must be submitted by Wednesday prior to the week of the request change.

☐ AM Care Day(s) attending: M T W TH F☐ PM Care Day(s) attending: M T W TH F

Provider Name:

Provider Name:

Provider Address:

Provider Address:

Phone Number:

Phone Number:

CANCELLATION OF REQUEST☐ AM Care Cancellation Date:☐ PM Care Cancellation Date:**PARENT/GUARDIAN INFORMATION**

First and Last Name

Primary Phone Number

Alternate Phone Number

The district provides transportation to and from care providers for eligible students in grades K-6. Transportation arrangements must be consistent with a maximum of two pick-up and drop-off points. Parents or guardians of students residing in the Rush-Henrietta Central School District must submit a written request for transportation to a child care provider annually no later than **April 1** of the preceding year.**

My signature certifies that I am the parent/legal guardian of the above-mentioned student and authorize transportation to and/or from the care provider listed.

For office use only

Parent/Guardian Signature

Date

Sitter	Bus In	Bus Out
Home	Bus In	Bus Out

** Change requests received after August 23 ***will not be accommodated*** until the second week of school. Bus passes ***will not*** be written for late child care form submissions.

Please submit form to the school your student attends.