

PERSON TO BE CALLED IN CASE OF EMERGENCY OR ILLNESS WHEN PARENT CANNOT BE REACHED

1. _____ Relationship to Student _____
PHONE NUMBER _____ Alternate Phone Number _____

2. _____ Relationship to Student _____
PHONE NUMBER _____ Alternate Phone Number _____

STAY AND PLAY ATTENDANCE:

____ FULL TIME (every day) ____ PART TIME (circle) MON TUES WED THURS FRI ____ AS NEEDED (send note to teacher)

USUAL PICK UP TIME: _____

For Pick-up: Please access the school through the side/back door of the Brick Building – Press the “RING” Doorbell to the right of the back door and a Stay and Play employee will bring your child out to you.

When school is closed for emergency reasons, Stay & Play will also close and you will be notified.

If there is a change of plans after 2:30pm please contact Miss Hailey McLean, Stay and Play Coordinator at 631-747-4651.

Stay & Play rates

\$8.50 per hour for one child

\$10.50 per hour for 2 children and

\$12.00 per hour for 3 or more children.

You will be billed monthly through FACTS on your Incidental account—separate from your tuition bill.

A \$ 10.00 Stay and Play registration fee per family will be billed to your FACTS account.

In case of accident or serious illness and you are unable to reach me, I authorize you to call the physician listed above and follow instructions, or take my child to the nearest emergency room by ambulance, if necessary. I also give permission for medical information to be shared between my child’s physician and school health personnel and between school personnel and appropriate school and Stay and Play staff

Parent Signature _____ Date _____