



Kirkwood Adventure Club

A High Quality Recreation and Care Program for Children K-5th Grade

- ✓ Before and After Care
- ✓ Early Release Days
- ✓ Days Off/Breaks

Our Philosophy

The mission of our program is to partner with families to provide a safe, high quality environment for ALL children to be kids and explorers during their non-school lives. Our desire is that this experience will assist the children in social relationships, homework, and exploration of enrichment activity themes. We will accomplish this by hiring highly trained staff members and through building a relationship with each child. Inclusion services are provided through this program model.

Content/Routine

Adventure Club (AC) will incorporate a structured and consistent routine on a daily basis. This will include a daily gathering to record attendance data and prepare students for the AC expectations as well as possibilities for the day. Staff will provide opportunities for snack, outside play, small group activities and exploration of enrichment themes using Adventure Kit materials. These kits will contain all the materials necessary to research, explore and create knowledge around exciting topics of interest. Students will also be given the invitation each day to participate in Homework Club with the guidance and support of AC staff.

Hours of Operation

7:00 a.m. - 6:00 p.m.

Locations

Tillman and Westchester Elementary Schools

Tuition Details

- A 10% discount, per month, will be given to the second child in the same family (with the same billing responsible parent or person), a 20% discount to the third child, and 30% to the fourth child enrolled full time in Adventure Club.
- There will be no discounts for missed days in the month.

Cost

For the 2011-2012 school year, we will be offering a three and five day program. **There will be a \$50.00 registration fee per child.**

AM Only (3 days)	\$108.00/month
AM Only (5 days)	\$180.00/month
PM Only (3 days)	\$120.00/month
PM Only (5 days)	\$200.00/month
AM & PM (3 days)	\$144.00/month
AM & PM (5 days)	\$240.00/month
Early Release	\$22.00/day (fee for families enrolled in AM only)
Days Off/Breaks	\$36.00/day

Scholarships are available for those who qualify for DFS childcare assistance.

Days Off/Breaks

Adventure Club will provide a full day of activities and care on some days when students are not in school including Records Days and Breaks. Children will be provided a morning and afternoon snack, but will be required to bring a sack lunch. Tuition for these days will be in addition to the regular monthly Adventure Club tuition.

Early Release

Adventure Club will provide an afternoon of activities and care to currently enrolled families. No additional charge will be required for those enrolled in PM Adventure Club. Registration and fee will be required for those families who want to participate in care on Early Release days but currently participate in AM Adventure Club only.

How to Register

To reserve a space for your child, bring or mail the Registration Form to:

Adventure Club

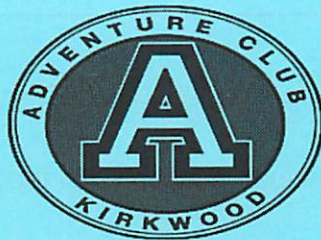
KECC, 100 N. Sappington Rd.

Kirkwood, MO 63122

- Upon enrollment, a program handbook will be mailed to you.
- Please note the \$50.00 registration fee is non-refundable.
- Registration begins March 15, 2011.

Questions

If you have questions, please do not hesitate to call Melissa Sandbothe at 213-6136.



REGISTRATION FORM

All sections of this form must be completed. Please complete one form for each child you are registering. To register, you may bring or mail in (see bottom of form for address) your deposit and registration form beginning March 15, 2011. Registering for Adventure Club is on a first come, first served basis.

Student Information

Student Name: _____ Gender: _____

Guardian Name(s): _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____ Other Phone #: _____

Email Address: _____

Child's Home School: _____ Grade Level (2011-12): _____

Emergency Information

Please designate a contact person who will be notified if guardians cannot be reached.

Emergency Contact: _____

Home Phone #: _____ Other Phone #: _____

Relationship to Child: _____

2nd Emergency Contact: _____

Home Phone #: _____ Other Phone #: _____

Relationship to Child: _____

Physician's Name: _____ Phone #: _____

Please list your child's known allergies (include medications, food, insects, etc.): _____

Registration Information (Please check all that apply)

AM Only/3 Days M T W R F \$108.00/Month

AM Only/5 Days \$180.00/Month

PM Only/3 Days M T W R F \$120.00/Month

PM Only/5 Days \$200.00/Month

AM and PM/3 Days M T W R F \$144.00/Month

AM and PM/5 Days \$240.00/Month

DFS Childcare Assistance eligible

Currently enrolled in YMCA SACC program for 2010-2011 school year

Early Release (\$22.00 per day for families enrolled in AM only)

September 23 October 28 December 9 April 13 May 4

Days Off/Breaks (\$36.00 per day)

October 17 October 31 November 23 December 22 December 23 December 27 December 28
December 29 December 30 January 3 February 17 March 2 March 16 March 19 March 20
March 21 March 22 March 23 March 26

Payment Information: \$50.00 deposit per child

Check # _____ (Please make checks payable to: Kirkwood School District)

Total Amount Enclosed _____

Additional items needed prior to start, if applicable:

- Health Plan (If chronic health conditions such as allergies, asthma, diabetes, etc. exist)
- IEP (If special accommodations are needed during attendance at Adventure Club)
- Custody Agreement
- Behavior Plan

Please read and sign below to note agreement to terms:

Upon submission of this application, I agree to pay all fees as outlined.

In the event that my child needs medical assistance and I am unable to be reached at the contacts listed above, I give my consent for Adventure Club staff to obtain, through a licensed medical professional and hospital of choice, such medical care that is reasonably necessary for the welfare of my child. I also agree to assume the cost for transport and treatment in such an emergency situation.

I agree for the image or likeness of my child (their name will not be identified) to be used by Adventure Club on the program website and in future media releases.

Guardian Signature: _____ Date: _____

Mail completed form and deposit to:

Adventure Club
KECC, 100 N. Sappington Rd.
Kirkwood, MO 63122