

***BRIDGEWATER-RAYNHAM REGIONAL SCHOOL DISTRICT***

**Presents**

**Before & After School Extension  
(B.A.S.E.)  
Preschool Daycare Program**

**2018 - 2019**

**Registration and General Information  
Handbook**



**Program Goals**

The B.A.S.E. Program is excited to announce the new Preschool Daycare Program for the 2018-2019 school year. The program will be held at the Raynham Middle School in Raynham, MA.

The daycare program will be staffed by qualified personnel with experience working with children ages 4 and up.

Our mission is to provide quality care for students before and after preschool, while keeping the lines of communication open between the program and home.

Constant student enrichment is provided through academically and socially fortifying activities.

We care very much about your children and are here to provide a support system in a safe and happy environment.

### **Daily Activities**

A daily schedule gives each student added motivation to come prepared and participate in each activity. It also allows parents the opportunity to further enhance activities at home.

**Activities include:** Preschool Enrichment Activities, Recreation, Group Games, Art & Crafts, Science Exploration...and more!

### **Times**

Students may attend B.A.S.E. Preschool Daycare 3, 4, or 5 days per week. The full day program is available from 8:15 AM – 5:00 PM. The half day program is available from 8:15 AM – 12:35 PM, or 11:20 AM – 5:00 PM.

### **Enrollment**

**The deadline for enrollment is August 21, 2018.** Students must be 4 years old and toilet trained.

If applications exceed capacity for enrollment, a lottery will be held to determine enrollment in the program. Currently enrolled preschool students, their siblings, and Bridgewater-Raynham school employees will have first priority.

## **BASE Preschool Daycare Program General Information**

George H. Mitchell Elementary School / 500 South Street / Bridgewater, MA 02324 2  
508-279-2123 / [www.bridge-rayn.org](http://www.bridge-rayn.org)

**Students must be registered at the George H. Mitchell Elementary School before starting the program. Enrollment requirements include birth certificate, residency verification, immunization and physical records, and school enrollment packet.**

**Absences or changes in daily routine:** If your child will not be attending the program on a given day, parents/guardians must notify the BASE Program.

**Calendar:** BASE Preschool Daycare follows the school calendar. If school is cancelled, the program will not be held. The program will also be closed if after school activities are closed due to inclement weather. In the case of a delayed school opening, the BASE Preschool Daycare morning session will also be cancelled.

**Arrival/Pick Up:** Parents/guardians must see their children into the building during morning hours using designated entrance, and must sign them out at end of day.

**Meals & Snacks:** If students will be having lunch with the program, they may **purchase school lunch for \$2.25 or bring their own lunch to school. Snacks should be brought from home (please note that the program is peanut-free).** Parents/guardians are encouraged to send bottled water. Prices are subject to change.

**Late Policy:** The B.A.S.E. program ends promptly at 5 PM. If there is an emergency, please make other arrangements and/or call the supervisor on duty. There is a \$1/minute late fee.

**Payment:** Payments must be made by the first of each month online via the [bridge-rayn.org](http://bridge-rayn.org) website or by money order. If payment is not made on time, children will not be able to attend the program. Questions regarding payment should be addressed to Jean Leibe at 508-279-2140 ext. 125, or [jleibe@bridge-rayn.org](mailto:jleibe@bridge-rayn.org). **Cash will not be accepted.** If monthly payments are not received by or before the first of the month, it will be considered your notice for withdrawal from the program and the slot will be provided to another student.

**Medical Matters:** All medical information must be on the Student Registration form. Please advise us in advance if a medical or emergency matter arises that is not on the form once school starts. **All students must be toilet trained to attend the BASE Program**

**Special arrangements** regarding such matters must be addressed with the school nurse *and* the after school supervisor.

Any other questions regarding the program may be directed to the program director, Mr. David Bewley at 508-631-1786 or [dbewley@bridge-rayn.org](mailto:dbewley@bridge-rayn.org).

## **B.A.S.E. Preschool Daycare Program Behavior**

*The School Discipline Code of Conduct is in effect during the after school program. Parents will be called to pick up students who display inappropriate behavior.*

**Please read and initial each item:**

I give permission for the Bridgewater Raynham Regional School District Schools & staff, to perform emergency first aid *or* for professional medical attendants (EMT); to treat my child in the event of an emergency.

I agree to hold Bridgewater-Raynham Regional Schools harmless for any injury that may result from activities in the B.A.S.E. Preschool Daycare Program. I hereby waive and release any and all rights and claims for myself, my heirs, executors and administrators this enrollee may have against the Bridgewater Raynham Regional School District Schools or its representatives, agents and successors for any and all injuries the participant may suffer in connection with their participation in this program.

\_\_\_\_\_  
Initials

I give permission for the program to take pictures and release any positive media regarding my child's participation in the program.

\_\_\_\_\_  
Initial

I have read and understand the Information, Policies, Procedures and Fees of the "Before & After-School Extension" Program and accept.

\_\_\_\_\_  
*Parent/Guardian Name, Please Print*

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

\_\_\_\_\_  
*Parent/Guardian Signature*

**B.A.S.E. Preschool Daycare Program Payment Agreement**

3 half days per week: \$285/month (\$2,850 annually)

4 half days per week: \$380/month (\$3,800 annually)

Optional full day add-on to the 3 or 4 day program: \$171/month (\$1,710 annually)

**I have read the policy of the BASE Program & BASE- K guidelines and accept all the requirements and payment schedules as noted above.**

\_\_\_\_\_  
*Parent/Guardian Name, Please Print*

\_\_\_\_\_  
*Parent/Guardian Signature*      **Date:** \_\_\_\_\_

*\*Please make a copy for your records*

**B.A.S.E. Preschool Daycare Program Registration Form**

*(One child per application please)*

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ D. O. B. \_\_\_\_\_

Today's Date: \_\_\_\_\_ New Student: Y \_\_\_\_\_ N \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Teacher: \_\_\_\_\_

Parents/Guardians: \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work \_\_\_\_\_

Parent/Guardian Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Emergency Contacts**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**What days are you interested in your child attending? Please specify half or full days.**

\_\_\_\_\_

*Please attach special circumstances (allergies, medical conditions, restraining orders, etc.)*

**Registrations can be completed and dropped off at The Mitchell at the Middle School,  
ATTN: B.A.S.E.**