

## Before and After School Supervision

*Before and after care supervision is available for a minimal fee for the following grade levels and times:*

**Before care** - K-6<sup>th</sup> grade students from 7:00 - 7:45 a.m.

**After care** - K-6<sup>th</sup> grade students from 3:20 – 4:30 p.m.

*(After care pick up begins at 3:45 p.m. in room 476. Please enter at the main school entrance.)*

*There will be no after care on days when school dismisses at 12:20 p.m.*

Cost Per Day:	1 child	Two or more children
AM Only	\$8.00	\$13.00
PM Only	\$8.00	\$13.00
Both AM and PM	\$14.00	\$20.00

Late fees will be assessed as follows:

1 <sup>st</sup> 15 min. late	\$15 fee
16-30 min. late	\$30 fee
31-45 min. late	\$45 fee
And so on.....	

**Payment:** Before/After care charges will be posted on RenWeb every Monday for the previous week. All payments should be made in the main office or by calling Mrs. Bowman at (614) 305-2031. Cash, checks, or credit card payments are acceptable. All checks should be made payable to Grove City Christian School (GCCS) and in the memo please write Before and After Care along with your child's name.

**Sign Up:** Please complete the registration form and send that in with your child on the first day they attend before or after care. Be prepared to show your ID when you pick up your child.

**More Information:** For more information or to ask questions, please email Ms. Bohlen at [bbohlen@grovecitychristian.org](mailto:bbohlen@grovecitychristian.org), or call (614)875-3000.

*\*Office phones are typically NOT answered after 4:00 p.m. Ms. Bohlen can always be reached by email at [bbohlen@grovecitychristian.org](mailto:bbohlen@grovecitychristian.org).*

## Before and After Supervision – Registration Form

Child (ren)'s name(s), grade, and teacher: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Any allergies or medical conditions: \_\_\_\_\_

\_\_\_\_\_

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Mother's Name \_\_\_\_\_

Phone #'s where you can be reached during before and after care time:

\_\_\_\_\_

Father's Name \_\_\_\_\_

Phone #'s where you can be reached during before and after care time:

\_\_\_\_\_

Who else is authorized to pick up your child (ren)?

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

**To ensure the safety of your child (ren), those picking up may be asked to show photo ID.**

Parent Signature: \_\_\_\_\_ Email: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Email: \_\_\_\_\_