



2018 CFEC SUMMER PROGRAM Exploring the Arts Through Our Senses

The Centers for Exceptional Children is offering 7 weeks of summer fun and learning at The Special Children's School!

- Classes for infants through 5th grade
- Staffed by teachers/teacher assistants from The Children's and The Special Children's School
- Small group sizes & low teacher/child ratios
- Nurse on site 8:30-4:30 each day
- Theme-based learning with an ARTS FOCUS
- Music, dance, drama, visual arts, and more
- Guest artists from the community
- End of summer Gallery Hop!



For more information, please contact:

Karen Young
The Special Children's School
336.703.4191 or email Karen@thecfec.org

**Inclusive Summer
Program with an
ARTS FOCUS!**

**June 20 – Aug 7
(7 Weeks)**

**Highly Qualified
WSFCS & CFEC
Staff**

**Guest Artists from
the Community**

**Children With and
Without Special
Needs Learning,
Playing and
Creating Together!**

**THE SPECIAL CHILDREN'S
SCHOOL**

4505 Shattalon Dr.
Winston-Salem, NC 27106

www.thecfec.org

June 20 – Aug 7 (M-F)

7:30 AM – 5:30 PM

\$180 Per Week

\$50 Registration Fee



APPLICATION FOR CFEC 2018 SUMMER PROGRAM

To be completed and placed on file prior to enrollment

Name of Child _____ Birth Date _____
(Last) (First) (MI) (Nickname)

Address _____ Zip Code _____

With whom does the child reside? _____

Weeks enrolling (check all that apply) ___ June 20-22 (W-F) ___ July 16-20
Please note: You will be responsible ___ June 25-29 ___ July 23-27
for payment for all weeks checked, ___ July 2-6 (Closed 4th) ___ July 30-Aug 3
even if your child does not attend. ___ July 9-13 ___ Aug 6-7 (M-T)

INFORMATION ABOUT THE FAMILY:

Parent/Guardian's Name _____ Home Phone _____
Address _____ Zip Code _____
Where Employed _____ Business Phone _____
Email Address _____

Parent/Guardian's Name _____ Home Phone _____
Address _____ Zip Code _____
Where Employed _____ Business Phone _____
Email Address _____

Insurance Provider _____ Policy # _____

INFORMATION ABOUT YOUR CHILD:

Does your child have any known allergies? No ___ Yes ___ Explain: _____

Does your child have any chronic illnesses/conditions? No ___ Yes ___ Explain: _____

Please give any information concerning your child's special needs which will be helpful.

EMERGENCY CARE INFORMATION:

Name of child's doctor _____ Office Phone _____
Address _____
Hospital preference _____ Phone _____

If neither parent (or guardian) can be contacted, call (please list relationship):

Name _____ Home Phone _____ Work Phone _____
Name _____ Home Phone _____ Work Phone _____

INFANTS and TODDLERS ONLY:

I request that my infant/toddler continue receiving therapies during the CFEC 2018 summer program through the CDSA.

(Please check all that apply) ___ Physical Therapy ___ Occupational Therapy ___ Speech Therapy

****PLEASE NOTE - No therapies for children 3 years and up in summer.****

AUTHORIZED PICK-UP:

Please give the **names and phone numbers** of all persons to whom the child can be released. If someone other than a legal parent/guardian comes to pick up a child, they will be asked to provide proper identification.

**The Centers for Exceptional Children
APPLICATION AGREEMENT**

I agree to sign a release form for my child's WS/FCS records (health information and education records) to be used by the CFEC Summer Program.

I understand I am committing to the weeks I checked for summer care and that I will be responsible for payment for all weeks checked, even if my child does not attend.

My signature indicates that I have received, read and understand the information outlined in:

- Summer & After School Program Handbook
- Summer Program Policies and Fee Schedule

(Signature of Parent) (Date)

I, as the operator of the program, agree to contact EMS/911 in the event of emergency. I will not administer any drug or any medication without specific instructions from the physician or the child's parent, guardian, or full-time custodian. Provisions will be made for adequate and appropriate rest and outdoor play.

(Signature of Director) (Date)

For office use only

Funding Source for CFEC Summer Program
___ DSS ___ Smart Start ___ Private Pay

Deposit paid _____



2018 CFEC Summer Program

Policies & Fee Schedule

The CFEC 2018 Summer Program will be held at **The Special Children's School** and will be staffed with teachers/teacher assistants from The Children's Center and The Special Children's School.

There is no transportation provided for the Summer Program. Parents are responsible for transporting their children to and from the program.

Hours of operation will be Monday-Friday, 7:30 AM until 5:30 PM. The 2018 Summer Program will operate during the following weeks:

___ June 20-22 (W-F, prorated)**	___ July 16-20
___ June 25-29	___ July 23-27
___ July 2-6 (Closed 4th)	___ July 30-Aug 3
___ July 9-13	___ Aug 6-7 (M-T, prorated) **

We will offer an Open House on Tuesday, June 19, 2018 from 1:00 – 3:00 PM. Parents can meet the staff during this time and pick up Summer Program Parent Handbooks. Please join us!

Financial Information

- We accept cash, check, money order or credit/debit card for payment.
- A **\$50 non-refundable registration fee** (to guarantee your child's spot in the program) along with application is due **no later than Friday, April 27, 2017.**
- Summer program enrollment is on a weekly basis. Parents must sign up in advance (before the program begins) for the weeks of care they need.
- All weeks of care needed must be checked by the application deadline. Drop-in care is not offered. Parents are responsible for payment for all weeks checked.
- All payments of **\$180 per week** are due in advance for each week by noon Monday. *****First and last weeks are not full weeks and are prorated at \$36 per day.***
- Families with 2 or more children enrolled in the CFEC Summer Program will receive a 10% discount on the second (and subsequent) child's weekly fee.
- Families that choose to pay for the entire summer in advance (must be all 7 weeks) will receive a 10% discount.
- If weekly payment is not made in advance by **noon Monday**, the child will not be allowed to return the next day.
- Full-day rates apply regardless of hours attending (no half-day rates).
- A late pick-up fee of **\$1.00 per minute** after 5:30 PM will be assessed and must be paid before your child can return.
- Three (3) late pick-ups may result in dismissal from the program.
- Failure to make scheduled payments as required will result in your child's dismissal from the program.

Absence

Please notify the CFEC Summer Program administrator at 336-703-4191 by 9:00 AM if your child will not be attending for the day.

Snacks and Meals

Parents will be responsible for packing a nutritious lunch and 2 snacks (including milk and juice) each day. Cafeteria service will not be available. All food must be packed in appropriate containers to maintain safe food temperatures (i.e. cold packs for cold foods and thermos containers for hot foods). Food must be labeled with the child’s name and date.

Personal Care Items

Parents must ensure that their children arrive each day appropriately dressed for the weather and with all needed items for the child’s personal care (i.e. diapers/Pull-ups, extra clothing, meals and snacks, etc.) If your child runs out of diapers or does not have extra clothes, you will be called to come for your child.

Medications

For children requiring medications during the day, the nurse on site will administer all medications per doctor’s orders. Medications must never be left in book bags/diaper bags.

Parent Expectations

Parents must sign their children in and out each day. Parents are expected to treat all staff and students with courtesy and respect. Parents are not permitted to discipline other students attending the CFEC Summer Program.

Discipline Policy

The CFEC Summer Program will follow the same discipline policy as the regular school day (refer to Parent Handbook).

Sick Policy

The CFEC Summer Program will follow the same sick policy as the regular school day (refer to Parent Handbook).

Custody Policy

Current custodial documents must be on file with the CFEC Summer Program to enforce non-authorized pick-ups.

Emergency Contact Number

A working contact number is required for any child enrolled in the program. If your contact number changes, you are required to notify the CFEC Summer Program administrator immediately. For health and safety reasons, families without a working contact number will not be allowed to remain in the program.

CFEC Summer Program Agreement

By enrolling my child in the CFEC Summer Program, I understand and agree to comply with all the above policies.

Child’s Name _____ Birthdate _____

Parent Signature _____ Date _____

Phone _____ Email Address _____