A Program for Positive and Caring Experiences
This program serves students from North Elementary, South Elementary and Middle School (%)
by providing a safe and caring environment where students will have the opportunity to
complete homework, practice study skills, and participate in recreational games and creative
activities.

Spaces fill up quickly, please submit by July 1, 2019

We accept the first 25 from each grade level

Last day to accept registrations will by July 20, 2019

After this date you will be put on a waiting list and contacted after September 1, 2019
Serving Kindergarten*-Sixth Grade
Kindergarten – Sixth Grade are eligible for the before and after school program.

Before school Program:

• Opens each day at South Elementary at 6:00 a.m. until school starts
• Bus shuttle service will be provided to North Elementary and Middle School prior to their school start times.
• Parents will bring students into the cafeteria at South Elementary door #2 to sign in their child/children (kdg.-6th grade)

After school:

• *Kdg.-2nd grade will report to room 503 at North Elementary
• 3rd-4th grade will report to the cafeteria at South Elementary
• 5th-6th grade will ride a shuttle bus to South and report to the cafeteria at South Elementary
• Snacks are provided

The PACE staff will create a caring and positive atmosphere for all students. Our program will promote appropriate and positive social interaction such as getting along, good sportsmanship, making a difference for others and giving back to our community. Our Program will offer opportunities for students to practice academic skills, complete homework, and participate in recreational games and creative activities. Our program will maintain a 15:1 ratio for K-2 students and 17:1 for grades 3-6. We look forward to serving your child!
Program Hours:
• Monday through Friday
• Regular school schedule 6:00 a.m.-Start of school day/End of school day-6:00 p.m.
• School Breaks, Snow Days, 6:00 a.m.-6:00 p.m. at South Elementary for Kdg.-6th grade.
• Scheduled Closings: PACE will not operate on the following Holidays: Labor Day, Thanksgiving Break, Christmas Eve, Christmas Day, New Years Eve, New Years Day, Memorial Day, MLK day and Presidents Day (unless it is a snow make up day and school is in session).
• In the event of school closings or delays due to weather, PACE will operate without delays (6:00 am to 6:00 pm) at South Elementary, unless the City or State has declared a County emergency. The cost for a snow day is $12.00. Parents are required to send a sack lunch for full days. Lunches will be provided for an additional $2.00 if school is canceled after students have arrived.
• PACE will operate beginning at 6:00 a.m. for all 2 hour delay days for an additional $4.00 per student.
• PACE will only be open during the Christmas break, Fall Break and Spring Break provided at least 15 students sign up in advance. If you sign up but your child does not attend. You will be billed for the dates you signed up for.

School out days:
You must sign up your child in advance to attend breaks • Christmas, Fall and Spring breaks are not included in the billing. You are not charged for these weeks. PACE will operate during these breaks when a minimum of 15 students sign up for 5 consecutive days up in advance. The fee for attending these days are $28/day for the first child and $23/day for the 2nd. There will be no fee if students do not attend those weeks. If you sign your child up for these weeks but they do not attend, you will be billed for the days you signed up for. If you do not contact the director prior to cut off date given, you will be billed.

Pick up procedure:
• Students and staff may be in the gym, outside for recess or traveling to and from the restroom if they are not in the sign in/out room at the time.
• Please inform PACE staff in advance if your child is unable to attend the program. Call your child’s school to report the absence from the program and e-mail PACE location to let them know they will not be attending. northpace@danville.k12.in.us and southpace@danville.k12.in.us If your child is picked up late on more than one occasion, there will be a late pick-up charge of $1.00 per minute for every minute after 6:00 p.m. The late fee will be reflected in the next billing statement. If your child is picked up late on more than five occasions, you may be asked to find alternative care.
NORTH Elementary K-2nd  398 Urban St, Danville, IN 46122

• Parents will pick up in room 503. The outside door leading into PACE is located next to the small fenced in playground area on the North side of the building. You must enter the security code to the left of the door. The security code will be e-mailed out in a welcome letter.
• On the counter you will find the sign in and sign out sheets. The person picking up will mark the time and their initials. Students will not be released to anyone unless parents have notified the PACE staff in advance or unless they are designated for pick up on the registration form.
• Make sure you check on the registration form what days your child will be attending the program. If your days will rotate please write “rotate”
• If you need to contact PACE NORTH to change person pick up or running late please call 745-2610 ext #5503

SOUTH Elementary 3rd-6th  1375 W Lincoln St, Danville, IN 46122

• Parents will enter through door #2. The cafeteria is to your immediate left. You must enter security code. The security code will be e-mailed to you in a welcome letter.
• On the table you will find the sign in and sign out sheets. The person picking up will mark the time and their initials. Students will not be released to anyone unless parents have notified the PACE staff in advance or unless they are designated for pick up on the registration form.
• Make sure you check on the registration form what days your child will be attending the program. If your days will rotate please write “rotate”
• If you need to contact PACE SOUTH to change person pick up or running late please call 463-701-1090
Payment:

• $25.00 registration fee is due at the time of registration
• Payment is expected whether your child attends or not
• Payment expected will remain consistent with the program option selected at time of registration. Program options cannot change week to week
• Make checks payable to DCSC
• Payment may be made bi-weekly, or monthly
• Please write your child's name check in the memo portion
• A payment box is located near the sign in/out sheets
• Payment statements will be e-mailed on a monthly basis
• Payment must be made by the 5th of each month. Prior to the next month’s service. If your PACE account should fall 30 days past due, your child will no longer be able to participate in the PACE program
• Parents will be billed an additional $12.00 if your child attends a school out day. (students are required to bring a sack lunch on school out days or parents will be billed an additional $2.00.)
• Parents will be billed $28/day for the first child, $23/day for the second child for Christmas, Fall and Spring Break days attended. Parents must sign up prior to these breaks in order for their child to attend. A sign up letter will go out in September. A minimum of 15 students must be registered for these Breaks in order for PACE to operate. If your child is signed up but does not attend you will be billed for the days you signed up for. This helps to keep unnecessary cost down
• If your child is picked up late on more than one occasion, there will be a late pick-up charge of $1.00 per minute for every minute after 6:00 p.m.
• Parents may bring PACE kids to South Elementary in the event of a 2 hour delay. Students who are not already registered for the before school program will be billed $4.00 for the 1st child and $3.00 for the 2nd child per 2 hour delay.
• Please allow a two week notice when withdrawing your child from the program. To re-enroll, you must pay another $25.00 registration fee.
• The option selected will be the option you will be charged each week. Changes to program options will result in a $15 fee
• Questions regarding billing may be directed to Mitzi Dennison at mdennison@danville.k12.in.us or by calling 745-2131 ext 4007
## Fee Schedule

<table>
<thead>
<tr>
<th>Description</th>
<th>Days</th>
<th>1st Child</th>
<th>Additional Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before School Only</td>
<td>1-2 days</td>
<td>$66.30 per month</td>
<td>$50.70 per month</td>
</tr>
<tr>
<td>Before School Only</td>
<td>3-5 days</td>
<td>$105.30 per month</td>
<td>$89.70 per month</td>
</tr>
<tr>
<td>After School Only</td>
<td>3-5 days</td>
<td>$136.50 per month</td>
<td>$124.80 per month</td>
</tr>
<tr>
<td>After School Only</td>
<td>1-2 days</td>
<td>$97.50 per month</td>
<td>$89.70 per month</td>
</tr>
<tr>
<td>Before &amp; After School</td>
<td>3-5 days</td>
<td>$214.50 per month</td>
<td>$195.00 per month</td>
</tr>
<tr>
<td>Before &amp; After School</td>
<td>1-2 days</td>
<td>$175.50 per month</td>
<td>$167.70 per month</td>
</tr>
<tr>
<td>School Out Days</td>
<td>For registered students only</td>
<td>Addt'l $12 / day</td>
<td>Addt'l $10 / day</td>
</tr>
<tr>
<td>Fall, Christmas and Spring Break</td>
<td>For registered students only</td>
<td>$28/day</td>
<td>Addt'l $23 / day</td>
</tr>
<tr>
<td>2 hour delay</td>
<td>For registered students only</td>
<td>$4.00 (unless you are already registered for before the school program)</td>
<td>Addt'l $3.00 (unless you are already registered for the before school program)</td>
</tr>
<tr>
<td>Late Pick up fee</td>
<td></td>
<td>$1.00/minute</td>
<td>$1.00 / minute</td>
</tr>
<tr>
<td>Lunch fee</td>
<td>Students must bring a lunch for school out days. If a child does not have a lunch, one will be provided.</td>
<td>$2.00</td>
<td></td>
</tr>
<tr>
<td>Registration fee</td>
<td>Due to time of registration or re-enrollment</td>
<td>$25.00</td>
<td>$25.00</td>
</tr>
</tbody>
</table>

- Please note: If your child was enrolled in the 2018-2019 PACE program or our Summer Program, account balances from the year must be paid in full to be accepted into the 2019-2020 PACE Program.
Student conduct:

It is required for students to follow the same expectations for discipline as they do in school. Each child is expected to treat others with respect, demonstrate safe behavior, and have fun! Should behavior interfere with the program or other participants, staff will discuss issues with parents and/or administration. If necessary, PACE employees will implement “time out” if a child’s behavior is too disruptive or unsafe. A child’s “time out” will be in a safe and supervised environment, but away from the rest of the group. A “time out” will be 1 minute for each year of age of the child. Should behavior incidents occur on a continual basis, the child may be dismissed from the program.

Health and Wellness:

The PACE program will operate under the same guidelines for “illness” as the schools. Students should not attend the program if they have a temperature at or above 100 degrees, if they have vomited or have had diarrhea in the past 12 hours, a rash of unknown origin, or any communicable diseases (infections or contagious). The child may return to the program after receiving proper treatment.

Accidents:

For any minor injuries (cuts, bruises, etc.), simple first-aid will be applied immediately and the parent/guardian notified at pick-up time. For more severe injuries, the parent or guardian will be called right away. If the parents or guardians cannot be reached, an emergency contact person will be called and asked to arrange for the child to be picked up, assessed and taken to the doctor if necessary. In extreme incidents, a staff member will contact the parent and meet the parent with the child at the hospital or call for an ambulance if necessary. In all cases of an accident causing injury, a PACE staff member will write up the incident and share this information with the parents.
Medication

If your son or daughter needs to take medication while at the program, you must abide by the following guidelines:
1. Written Instructions from a doctor. Current prescription bottle with label is ok.
2. Written permission from the parent.
3. All medicine should be brought directly to the PACE staff to be safely stored and administered under adult supervision. The medication should be in the original container and labeled with the student’s name and dosage instructions.
4. No medication will be sent home with a student. Parent/guardian will need to pick up any medication that needs to be returned home.
5. Students will be allowed to carry emergency PRN medications such as inhalers and epi-pens as long as a note from the doctor, as well as the parent, has been provided to a PACE staff member.

Program Administrator:

Mitzi Dennison is the program director. My role will be leading our staff in implementing creative activities and instruction, ordering materials, coordinating snacks, addressing questions and concerns. My first priority is your children and their safety. It is my goal for PACE to be a safe, fun environment where they can learn and make friends.

Please feel free to contact me at mdennison@danville.k12.in.us

Monday thru Friday 8:00am-4:00pm 317-745-2131 ext 4007

After 4:00 p.m. please call 463-701-1090 (Calls accepted until 6:00pm.)
Registrations may be dropped off at any school building

P.A.C.E 2019-2020
Before and After School Program Student Registration
A Program for Positive and Creative Experiences

First Name________________________ Last Name____________________________

Start Date if after 8/8/18______________ Grade (in the fall)___________ Gender______

<table>
<thead>
<tr>
<th>Check a program option below</th>
<th>Description</th>
<th>Days</th>
<th>Days Attending (please circle)</th>
<th>Cost for 1st child monthly</th>
<th>Cost for 2nd child monthly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before School Only</td>
<td>1-2 Days</td>
<td>M T W R F</td>
<td>$66.30</td>
<td>$50.70</td>
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</tr>
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</table>

Names of Additional children attending: ____________________________________________
____________________________________________________________________________

$25 Registration fee is due at the time of enrollment

Are you employed by Danville School Corporation? yes/no (circle one)
Contact #1 Parent/Guardian:

Name____________________________________ Email______________________________
Home phone number________________________ Work ______________________________
Cell phone number__________________________

Contact #2 Parent/Guardian:

Name____________________________________ Email______________________________
Home phone number________________________ Work ______________________________
Cell phone number__________________________

Child’s Address_____________________________ City_____________ Zip_______________
PACE - Medical Permission Form

Child’s Name: ____________________________ Date of Birth _________________________
Parent/Guardian(s) _____________________________________________________________
Home Phone: ____________________________
Work# _________ Cell# ______________ Other: _________________________________
Emergency Name and Number if Parent/Guardian Cannot Be Reached:
________________________________________ Phone: ____________________________
Allergies: ____________________________ Symptoms: ____________________________
Treatment: ________________________________________________________________

All Medical Conditions: ________________________________________________________

Medications/Inhalers To Be Given & Instructions for Administration:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

MEDICAL PERMISSION:
I hereby give permission for Danville Community PACE Program/Authorized Personnel to give
any prescription/OTC medications provided by the guardian. I also give permission for PACE personnel
to obtain the services of a physician/hospital in case of a medical emergency and to
take whatever action they consider to be in
____________________________________________________________________________
____________________________________________________________________________

Signature of Parent/Guardian __________________________ Date ________________________

Student Pick-Up Information
I authorize only the people named below to pick up my child unless otherwise noted. For your
child’s safety, he/she will not be released to anyone else. All authorized persons must be 18
years of age or older. No changes to this list will be made unless the parent or legal guardian
whose signature appears below requests such changes.
Name: ___________________________________________ Name: _______________________
Phone: ___________________________________________ Phone: _______________________
Other phone: ___________________________ Other:
Relationship: _________________________ Relationship:
Name: ___________________________________________ Name: _______________________
Phone: ___________________________________________ Phone: _______________________
Other phone: ___________________________ Other:
Relationship: _________________________ Relationship:
Name: ___________________________________________ Name: _______________________
Phone: ___________________________________________ Phone: _______________________
Other phone: ___________________________ Other:
Relationship: _________________________ Relationship:

I have read the parent packet ______________ initials/Date _________________________

Parent/Guardian signature: ______________________________________________________