



Wilson Hall

Baron Care

2020 – 2021

Welcome to Wilson Hall's after school program, Baron Care!

We are excited to start a new school year with our 3-year old preschool through fifth grade students in our fabulous Randle Center. Once school is dismissed, we offer snacks and provide time specifically for homework before heading to the playground. When not outside due to weather, students can be found playing games, solving puzzles, "cooking" in our kitchen play set, creating arts and crafts, or watching a movie in the Randle Center, Multi-Purpose Room, or Gym. There is always something fun to do!

Baron Care Registration is open throughout the school year; however, families are encouraged to register their children by Friday, August 21, 2020. Baron Care for the 2020 – 2021 school year will begin on August 25, 2020 and end on May 26, 2021. Children are my passion and it is an honor for our staff and for me to be a part of the village it takes to raise your children. We thank you for the opportunity to watch them grow and thrive each day, and for the privilege to serve you and your family. We are happy to have you join us for another wonderful year at Baron Care!

If you have any questions or concerns, please do not hesitate to contact me during my office hours of 8:00 a.m. – 6:00 p.m.

Kind regards,

Martha Jane Edwards
Director of Baron Care

marthajaneedwards@wilsonhall.org

Phone: 803.840.4664



Wilson Hall Baron Care

Enrollment

The following documents are required for Wilson Hall's Baron Care Enrollment and must be submitted annually as required by the SC Department of Social Services.

- Baron Care Policies Agreement
- 2020-2021 Baron Care Registration Form
- DSS Regulation No. 114-503.F(2) – Release of Children form
- DSS Form 2900 – General Record and Statement of Health form
- Form for CDCC & GDCH
- Copy of student's Immunization Record
- Copy of student's Birth Certificate

IT IS REQUIRED THAT PRIOR TO ATTENDING BARON CARE, CHILDREN MUST BE COMPLETELY REGISTERED AND HAVE SUBMITTED ALL REQUIRED FORMS AND DOCUMENTATION.

****NO EXCEPTIONS****

AUGUST TUITION:

1st – 5th grade: \$60/student (August 25th - August 28st)

PS4 and K5: \$40/student per day (7:45 a.m. until 6:00 p.m.) (through August 28th) ****Bring lunch.**

Augst 31st will be included with September billing.

**** Student must pack a lunch on days that school is dismissed early.**

Baron Care Tuition September 2020 – May 2021

ONE STUDENT		ADDITIONAL SIBLINGS		TWO SIBLINGS MONTHLY RATE
Days per Week	Monthly Rate	Days per Week	Monthly Rate	Monthly Rate
5	\$240	5	\$170	\$410
4	\$192	4	\$139	\$331
3	\$144	3	\$110	\$254
2	\$95	2	\$77	\$173
1	\$50	1	\$40	\$90



Wilson Hall Baron Care

Policies

Schedule Changes & Additional Days

The Baron Care Director must be informed in writing (email, text, etc.) by a parent if a change should occur in their scheduled day(s). Additional days are \$20 per child and \$10 for sibling(s) after a 24 hour request is submitted and confirmed by the director. Fees are due with the next month's payment. No more than 4 days may be added per month.

Billing & Payments

Payments are due by the first day of each month via ParentsWeb, cash, or check. Late payments will result in a \$20 late fee billed to your account.

Hours & Days

If a child stays less than five days per week, these days must be the same every week. Unused days which have been paid for in advance may NOT be rolled over to a future date. Baron Care is not available on weather-related school closures.

School Holidays

An effort will be made to have Baron Care open on school holidays if there is enough interest and it can be properly staffed. The cost is \$40 per day for the 1st student and \$30 per day for each additional sibling. A snack will be provided but children must bring a packed lunch on school holidays and early dismissal days.

Attendance

Communication concerning attendance will not be accepted by verbal instructions. Acceptable forms of communication include text or email with the director. Baron Care students must be attending school no later than 11:00 a.m. in order to attend Baron Care. If a student is sent home from school for disciplinary reasons, they will not be allowed to attend Baron Care on that day.

Discipline

Baron Care follows and enforces the disciplinary procedures stated in the Wilson Hall Handbook. Bullying, profanity or aggressive acts towards other students or staff will NOT be tolerated. The school reserves the right to refuse or terminate any student from the program who is not willing to cooperate fully with the director, staff, or participants.

Homework

Lower School students are allotted one hour for homework. Kindergarten students are given homework time on days when homework is assigned. Baron Care staff will assist student with homework but are not responsible for accuracy or completion of homework. It is suggested that parents check students' homework agenda daily.

Dismissal

A walkie-talkie with instructions will be available at the Randle Center and used for pick up. Children will be released ONLY to authorized persons provided on the Release Form. Baron Care begins once school is dismissed and ends at 6:00 p.m. including ALL EARLY DISMISSAL DAYS.

PLEASE RETAIN A COPY OF THESE POLICIES AND TUITION SCHEDULE FOR FUTURE REFERENCE.



Wilson Hall Baron Care 2020 – 2021

Policies Agreement

I have read and agree to follow all policies and billing information for Wilson Hall's after school care program, Baron Care. I understand it is my responsibility to become familiar with these policies and procedures. I authorize Wilson Hall Baron Care to use pictures of my child for marketing and news purposes. I understand that my child will be participating in a structured program that includes homework assistance and a full range of recreational play. I fully understand that various activities, as well as other types of school and play activities, are always susceptible to a certain amount of risk and, therefore, agree to not hold Wilson Hall Baron Care, Baron Care staff, Wilson Hall school, or Wilson Hall students liable for accidents or injuries to my child during their participation. I agree to compensate the school for any property damages caused by my child. I understand that my child's continued enrollment in this program is dependent upon my continued support of the mission, policies and procedures of Baron Care as documented in the policies.

Please sign and submit for enrollment.

Child's Name: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Director's Signature: _____ Date: _____



Wilson Hall Baron Care

2020 - 2021 Registration Form

****Registration fee of \$50 per family is required****

Student's Full Name

Date of Birth

Date of Enrollment

Gender

Grade

Homeroom Teacher

Full Name of Parent/Guardian

Relationship

Primary E-mail Address

Primary Phone Number

Full Name of Parent/Guardian

Relationship

E-mail Address

Phone Number

Baron Care Tuition

August Tuition

1st – 5th Grade: \$60/student (August 25th – 28th)

PS4 and K5: \$40/student per day (through August 28th)

**** August 31st will be included in September billing.**

September 1, 2020 – May 26, 2021 Tuition

ONE CHILD

5 days per week \$240/month

4 days per week \$192/month

3 days per week \$144/month

2 days per week \$96/month

1 day per week \$50/per month

ADDITIONAL SIBLING

5 days per week \$170/month

4 days per week \$139/month

3 days per week \$110/month

2 days per week \$77/month

1 day per week \$40/month

MUST BE THE SAME DAYS EACH WEEK

****Prepaid, unused days may not be rolled over to a future date****

Please circle attendance days: **Monday** **Tuesday** **Wednesday** **Thursday** **Friday**

Parent/Guardian Signature

Date

PARENT'S AUTHORIZATION FORM FOR CDCC AND GDCH

DayCareName: Wilson Hall Baron Care

Child's Name: _____

A. DISCIPLINE:

Do you understand the discipline policy of the day care? _____ Yes _____ No

Does this day care use corporal punishment as discipline? _____ Yes _____ No

If so, do you give your permission for the staff to spank your child? _____ Yes _____ No _____ N/A

Signature

Date

B. MEDICINE:

I give permission for prescription and non-prescription medicine to be given to my child.

Signature

Date

C. EMERGENCY MEDICAL TREATMENT

I give permission to Wilson Hall Baron Care to obtain emergency medical treatment.

Name of Day Care

Signature

Date

D. PERSONS AUTHORIZED TO TAKE MY CHILD FROM THE DAY CARE:

Signature

Date

E. I give permission for my child to be transported to and from the day care. I give permission for my child to be transported on field trips.

Signature

Date

F. I give permission for my child to participate in swimming activities.

Signature

Date



Wilson Hall Baron Care

Release of Children

In compliance with DSS Regulation No. 114-503.F (2), your child will be released only to those people listed on this form. Additional names can be added by putting the additional name in writing and delivering it to the caregiver in person. No phone calls or notes will release a child to someone not on this list.

The following people have permission to pickup _____
(Student Name)
from Wilson Hall Baron Care:

Name

Phone Number

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Please have your child picked up by 6:00 p.m. Parents will be charged \$5 for every minute after 6:00 p.m. Staff will provide documentation of children picked up after 5:45 p.m. to the director on the following workday. Parents will be billed for additional charges stemming from tardy pick up. Late payment must be made with the next month's regular payment.

Parent Signature: _____

Date: _____

South Carolina Department of Social Services
Child Care Regulatory Services

**GENERAL RECORD AND STATEMENT OF CHILD'S HEALTH FOR ADMISSION
TO CHILD CARE FACILITY**

This form is to be completed for each child at the time of enrollment in the child care facility, updated as needed when changes occur, and maintained on file at the facility.

GENERAL INFORMATION: (to be completed by Parent or Guardian)

Name of Facility: _____ County: _____

Address: _____
Street Address - no Post Office Boxes City, State, Zip

Child's Name: _____
Last First Middle Initial Nick Name

Date of Birth: _____ Enrollment Date: _____

Child's Current Home Address: _____
Street Address City, State, Zip

Parent/Guardian's Full Name: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

Parent/Guardian's Full Name: _____

Home Phone: _____ Work Phone: _____ Other Phone: _____

You must have two individuals who have the authority to obtain emergency medical treatment for the child.

1. Person responsible if parent/guardian unavailable for emergency medical services:

Full Name Relationship
Address: _____
Street Address - no Post Office Boxes City, State, Zip

Telephone Number(s): _____ Family Code Word(s): _____

Is Child currently enrolled in school? (K5 up to 6years old) Yes No

My Child will regularly attend this facility **FROM** _____ am/pm **TO** _____ am/pm

If Child is a drop-in, indicate hours of care: **FROM** _____ am/pm **TO** _____ am/pm

Check all days Child will regularly attend this facility: Mon Tues Wed Thurs Fri Sat Sun

Check all meals Child will receive daily: Meals are not offered Breakfast Morning Snack Lunch

Afternoon Snack Dinner Evening Snack

HEALTH INFORMATION: (to be completed by Parent or Guardian)

Family Physician or Health Resource: _____
Name

Street Address City, State, Zip Telephone

Emergency Care Provider: _____
Emergency Facility Name

Street Address City, State, Zip Telephone

Dental Care Provider: _____

Name

Street Address

City, State, Zip

Telephone

Health Insurance Provider: _____

Name

Certificate of Immunization: Yes NO N/A Please explain:

My child has the following health conditions such as allergies, asthma, diabetes, epilepsy, etc., and/or takes the following medications on a regular basis:

Additional Comments:

I certify that to the best of my knowledge _____

Child's Name

is in good mental and physical health and able to participate in the child care program at

Name of Child Care Facility

Signature: _____ Date: _____

Parent or Guardian

Signature: _____ Date: _____

Director / Operator / Staff Designee



Wilson Hall Baron Care

Registration Checklist

- 2020 - 2021 Baron Care Registration Form
- Wilson Hall Baron Care Program Policies Agreement
- Parent's Authorization Form for CDCC AND GDCH
- 05S Regulation No.114-503.F (2) - Release of Children
- DSS Form 2900-General Record and Statement of Child's Health
- Copy of Immunization Record
- Copy of Birth Certificate
- Registration Fee (\$50 per family)
- August Tuition

*All completed paperwork, registration fee and August tuition must be turned in by
Friday, August 21, 2020 before a student can attend Baron Care.*