

# Wilson Hall Baron Care 2025-2026

#### Welcome to Our After School Program, Baron Care!

It has been a pleasure getting to know your little Barons! We are excited to kick off another school year at our After School Program for 3-year-olds through sixth grade students. Our Baron Care program is more than childcare! Once school is dismissed, we prioritize dedicated homework time in a quiet and supportive environment encouraging students to complete their assignments and daily reading. After homework and snack time, we provide engaging activities to promote peer interaction and collaborative play including open-ended time on the playground for children to unwind from the school day. When not outside due to weather, students can enjoy a variety of indoor activities including playing games, solving puzzles, hands-on interactive learning, creating arts and crafts, or watching a movie in the Randle Center. 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 Monday, July 15th, 2025. Baron Care for the 2025 – 2026 school year will begin on Tuesday, August 12, 2025, and will end on Wednesday, May 20, 2026.

Our amazing Baron Care staff provides a safe and consistent environment for students who require afternoon care and they look forward to working with your child as they grow and learn! We are extremely thankful for the opportunity to care for your little Barons! We look forward to another fabulous year at Wilson Hall Baron Care!

Please let me know if you have any questions and/or concerns.

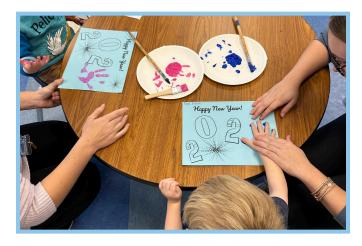
God Bless!

Brooke Tidwell Director of Auxiliary Programs brooketidwell@wilsonhall.org









www.wilsonhall.org



# Wilson Hall Baron Care Program Enrollment Information

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

- Baron Care Policies Agreement
- 2025-2026 Baron Care Registration Form
- DSS Form 2900 General Record and Statement of Child's Health form
- Parent's Authorization Form for CDCC & GDCH
- Copy of student's Immunization Record on required SC DHEC 4024 form
- \*Military Dependents must submit SC DHEC 4375 form (filled out by a physician and signed) stapled to the DD-2766-C or the P-0639 form or transfer immunizations to SC DHEC 4024 Form
- Copy of student's Birth Certificate

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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 2025 Tuition					
Grades 1 – 6	\$200 / student	August 12 – August 29			
PS3, PS4 and K	\$45 / student per day	August 12 – August 15			
PS3, PS4 and K	\$90 / student	August 18 – August 22			
PS3, PS4 and K	\$90 / student	August 25 – August 29			

Raron Care Tuition

September 2025 – May 2026						
ONI	E STUDENT	ADDITIONAL SIBLINGS				
Days per Week	Monthly Rate	Days per Week	Monthly Rate			
5	\$300	5	\$205			
4	\$245	4	\$175			
3	\$200	3	\$145			
2	\$145	2	\$105			

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\$75

\$110



# Wilson Hall Baron Care Registration Form

2025-2026

\*\* Registration fee of \$75 per family is required. \*\*

Student's Full Name:			Date of Birth:				
Date of Enrollment:	Gender:	Grad	le: Hon	neroom Teacher	•		
Full Name of Parent/Gu	ardian:		·	Relationship:			
Primary Email Address:			Primary F	Phone Number:_			
Full Name of Parent/Gu	ardian:		·	Relationship:			
Primary Email Address:			Primary F	Phone Number:_			
Parent/Guardian is a Wilso	on Hall Faculty/Staf	f member? (c	ircle one) YES	NO			
	Ba	ron Care	<b>Fuition</b>				
August Tuition:	☐ 1 <sup>st</sup> – 6 <sup>th</sup> Grade: \$20	00/student (Augu	ust 12 - August 29)				
	PS3, PS4 and K5:	\$45/student per	day (August 12 - A	August 15)			
	PS3, PS4 and K5:	\$90/student (Au	igust 18 - August 2	2)			
	PS3, PS4 and K5:	\$90/student (Au	igust 25 - August 2	9)			
<u>September 2, 2025 – Ma</u>	ı <u>y 20, 2026:</u>						
	ONE CHILD		ADDITI	ONAL SIBLING			
	□ 5 days per week \$3	00/month	□ 5 days pe	r week \$205/month			
	☐ 4 days per week \$2	45/month	☐ 4 days pe	r week \$175/month			
	□ 3 days per week \$2	200/month	□ 3 days pe	r week \$145/month			
	□ 2 days per week \$1	45/month	□ 2 days pe	r week \$105/month			
	□ 1 day per week \$11	0/per month	□ 1 day per	week \$75/month			
			ME DAYS EACH Vote to a find the state of the				
Please circle attendance da	y/s: <b>Monday</b>	Tuesday	Wednesday	Thursday	Friday		
arent/Guardian Signature			Date				



# Wilson Hall Baron Care Policies & Parent Handbook 2025-2026

The 2025-2026 Baron Care Program Policies and Handbook has been prepared as a guide to the policies and procedures and other essential information to assist our families with the Wilson Hall After School Care Program. This information contained herewith establishes guidelines only. The Baron Care Program reserves the right to make changes in the content or application of these policies and handbook and to implement those changes with or without notice.

#### **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 \$30 per child and \$15 for sibling(s) after a 24 hour request is submitted and confirmed by the Director. 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.

#### **Billing & Payments**

Payments are due by the fifteenth (15th) day of each month via FACTS or check. Late payments will result in a \$20 late fee billed to your account. Potential suspension of care services may occur if your account is in arrears.

#### **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 \$45 per day for the 1<sup>st</sup> student and \$35 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 as 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. Wilson Hall does not use Corporal Punishment as discipline.

#### 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 students with homework but are not responsible for accuracy or completion of homework. It is suggested that parents check students' homework agenda daily.

#### Tracking/Release of Children

Each child is accounted for when they enter or exit the premises, and/or move to a new location in or around the campus. 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 located in the FACTS portal. Baron Care begins once school is dismissed and ends at 6:00 p.m. including ALL EARLY DISMISSAL DAYS.

#### Late Pickup

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

#### **Medications**

If a student takes medication during after school hours, the school nurse AND the child's parent(s) will be notified prior to dispensing any medication. Staff members are not to administer medications to students unless written permission has been given by the parent. Under the circumstances where a child is mildly ill, Baron Care staff will communicate with the school nurse to ensure that the child is isolated until parents are able to pick up the child. A Baron Care staff member will remain with the child at all times unless the child has been turned over to the school nurse for care.

#### First Aid/CPR/AED

At least one Baron Care staff must be CPR/First Aid/AED certified at all times during hours of operation. No one who is not certified will be left alone with the children. Renewal is every two years and is provided by Wilson Hall. There are several locations around campus where AEDs are located: Main Gym, Middle school hallway next to workroom, Preschool/Kindergarten Work Room in Randle Center, and Nurse's office.

#### Parental Access

Parents are permitted free and full access to their child without prior notice unless there is a court order limiting parental access. Parents with court orders limiting their visitation must seek administrative approval upon arriving on campus before contact can be made with the child.

#### Confidentiality

The family educational Rights and Privacy Act (FERPA) has afforded students the right and protection of confidentiality and must always be enforced. Staff members are trained to maintain strict confidentiality in all circumstances. All student records and any personally identifiable information is confidential and will not be shared with others without expressed written permission from the school administration.

#### Discrimination/Slander/Harassment

Harassment of a student/staff member by another student, by a teacher or other staff member is a violation of school policy. This includes (but is not limited to) harassment based on race, national origin, marital status, sex, sexual orientation, gender identity, religion, or disability. Punishable harassment is conduct, including verbal conduct, (1) that creates (or will certainly create) a hostile environment by substantially interfering with a student's/staff's educational benefits, opportunities, or performance, or with a student's/staff's physical or psychological well-being; or (2) that is threatening or seriously intimidating.

#### **Emergency Preparedness**

Wilson Hall has an emergency management plan with established procedures to follow in the event of an emergency. Although we hope that our emergency plans will never have to be exercised, it is imperative that we are prepared in the event of an emergency. We will provide the best possible leadership for the students in our care in the event of an emergency situation.

#### **Emergency Medical Plan**

Wilson Hall has a written plan to address conditions under which emergency medical care or treatment is warranted, steps to follow in a medical emergency, the hospital/medical entity to be used, the method of transportation to be used and a staffing plan to include who will accompany the child with records to the emergency location and will stay with the child until parents arrive.

Wilson Hall Baron Care is a licensed and insured Child Care Facility through the Department of Social Services.

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



# Wilson Hall Baron Care Program 2025-2026

# Policy Agreement, Consent, and Handbook Acknowledgment

I have read and agreed to follow all policies, the Wilson Hall Handbook, 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 understand that my child will be participating in a structured program that includes homework assistance, instructional activities, 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 release and hold harmless the School (Wilson Hall), Baron Care employees/staff, its agents and school employees from claims, losses, or other liabilities for injuries to the Student not from gross or willful negligence by the School, its agents or employees. I agree to indemnify the School for damage, harm or loss caused by the Student. I will not hold the School responsible in the case of accident or injury as a result of participation and give my consent for my child's participation in the Wilson Hall After School Care program. 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.

#### Release of Children and Publication/Social Media Permission

In compliance with DSS Regulation No. 114-503.F (2), your child will be released only to those individuals who are listed as an Emergency Contact/Authorized Pickup in the FACTS portal. These names are electronically added on the Student Information Forms. Please notify the school to make any changes and/or updates by emailing Mrs. Liz McGinnis, <a href="mailto:lizmcginnis@wilsonhall.org">lizmcginnis@wilsonhall.org</a>, or Mrs. Brooke Tidwell, <a href="mailto:brooketidwell@wilsonhall.org">brooketidwell@wilsonhall.org</a>. No phone calls or notes will be accepted to release children to an unauthorized person.

Wilson Hall and Baron Care often use photographs of students in publications and for marketing purposes. The Media Release is agreed upon when submitting your Student Information Forms in FACTS. I understand that I must inform the school in writing if I do not wish for my child's photograph to be published for school use.

#### Acknowledgment

I have received and thoroughly read, understand, and agree to all of the policies and procedures contained in the Baron Care Policies, Procedures and Handbook. I understand that it is my responsibility to become familiar with these policies and procedures and abide by them. I understand that my child's continued enrollment in this program is dependent upon my continued support of the mission and documented policies, procedures, and handbook of the Baron Care Program.

Child's Name:	Grade:
Print Parent/Guardian Name:	
Parent/Guardian Signature:	Date:
Parent/Guardian Signature:	Date:
Director's Signature:	Date:

# PARENT'S AUTHORIZATION FORM FOR CDCC AND GDCH

Daycare Name: Wilson Hall	Child's Name:			
A. DISCIPLINE:				
Do you understand the discipline	policy of the day care?	Yes	No	
Does this day care use corporal p	unishment as discipline?	Yes <u></u>	No	
If so, do you give your permission	n for the staff to spank your child?	Yes(	No	_ N/A
Parent/Guardian Signature	Date			
B. MEDICINE:				
I give permission for prescrip	tion and non-prescription medicine to	be given to	my child.	
Parent/Guardian Signature	Date			
Name	lson Hall to obtain emergency medic			
Parent/Guardian Signature  D. PERSONS AUTHORIZED TO	Date  TAKE MY CHILD FROM THE I	DAYCARE	<b>:</b>	
See Release of Children Form for	or authorized individuals.			
Parent/Guardian Signature	Date			
<b>E.</b> I give permission for my child to child to be transported on field trips	be transported to and from the dayca	re/school. I	give permis	sion for m
Parent/Guardian Signature	Date			
<b>F.</b> I give permission for my child to	participate in swimming activities.			
Parent/Guardian 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:	Wilson Hall				County:		_Sumter		
Address:									
	ress - no Post Office Boxes			City		State	2	Zip	
Child' Name:	Last								
	Last	First		Middle Ini	itial			Nick Name	•
Date of Birth:					Enrollme	ent Date: _			
Child's Current Home	Address:Stree								
Parent/Guardian's Full	Name:	et Address			City		State		Zip
Home Phone:		Work Phone: _				Other Pho	one:		
Parent/Guardian's Full	Name:								
Home Phone:		Work Phone: _				Other Pho	one:		
	dividuals who have the						d.		
Address:	Full Name				Relationshi	p			
	StreetAddress				City		State		Zip
Telephone Number(S):					Family C	Code Word	(s):		
. Person responsible Address:	if parent/guardian unava	illable for emergency	medical servi	ices:	Relationshi	p			
7 Iddi 655.	StreetAddress				City		State		Zip
Telephone Number(S):					Family C	Code Word	(s):		
Is Child currently enro	lled in school? (K5 up to	6 years old): Please	Circle One	YES		NO			
My child will regularly	attend this facility: FR	ОМ	am/pm T0	00		am/p	m		
If Child is a drop-in, in	dicate hours of care: FR	ОМ	an	n/pm TO_				_am/pm	
Circle all days Child v	will regularly attend this	facility: MO	N TUES	WED	THURS	FRI	SAT	SUN	
Circle all meals Child	will receive daily: MF	CALS ARE NOT OF	FERED	BREAK	FAST	MORNI	NG SNA	CK	LUNCH
AFTERNOON SNAC	CK DINNER	EVENING SM	NACK						
	ATION: (to be complete	·	ŕ						
Family Physician or H	ealth Resource:		Name						
Street Address	City	, State, Zip			Telephone				
	-	-r							
Emergency Care Provi	ucı	Emergency Facility	y Name						
Street Address	City	, State, Zip			Telephone				

Dental Care Provider:			
		Name	
Street Address	City, State, Zip		Telephone
Health Insurance Provide:			
Certificate of Immunization (Circle One): YES	NO N/A Pl	ease explain:	
My child has the following health conditions such on a regular basis:	as allergies, asth	ma, diabetes, epilepsy, etc	c., and/or takes the following medications
Additional Comments:			
I certify that to the best of my knowledge			is in good mental health and physica
health and able to participate in the child care program	Child's Name n at	Wilson Hall  Name of Child Care Facility	
Signature:Parent or Guardian		Date	e:
Signature:	Degiones	Date	e:

DSS Form 2900 (MAR 10) Page 2



# Wilson Hall Baron Care Program 2025-2026

# **Registration Checklist**

□ 2025 - 2026 Baron Care Registration Form
☐ Wilson Hall Baron Care Program Policies Agreement
☐ Parent's Authorization Form for CDCC AND GDCH
□ DSS Form 2900 - General Record and Statement of Child's Health
☐ Immunization Record (Please email directly to the School Nurse, <u>allysonsanders@wilsonhall.org</u> )
☐ Birth Certificate *New Students Only*
<ul> <li>→ PS3-K5: Please email directly to Baron Care Director, <u>brooketidwell@wilsonhall.org</u></li> <li>→ 1st-6th Grade: Please email directly to the Lower School office, <u>ashleymelton@wilsonhall.org</u></li> </ul>
☐ Registration Fee (\$75 per family automatically billed through FACTS)
☐ August Tuition (Automatically billed through FACTS)

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

If you have any questions, please contact Brooke Tidwell, Director of Auxiliary Programs, at <u>brooketidwell@wilsonhall.org</u>.