Lion’s Lair Program and Registration Information 2018-19

Lion’s Lair provides quality before and after school care for the students of Notre Dame Academy. The program will provide supervised activities, which can include large group games, homework help, snack, creative activities, and free play. The goal of the program is to create a fun, safe, educational, and nurturing environment for the participants.

<table>
<thead>
<tr>
<th>Hours of operation</th>
<th>7 – 9 a.m. and 4 – 6 p.m.</th>
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<tbody>
<tr>
<td>Fee for services</td>
<td>$7.00 Per time block* for registered families</td>
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<td>$10.00 Drop-in per time block for non-registered families*</td>
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<td>(Per child per day)</td>
<td>$45.00 Non-school and snow days*</td>
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<td>$25.00 Late start/early release days</td>
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<td>Late pick up fee is $1 per every minute after 6:00 p.m.</td>
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| Payments | Parents will be billed in arrears through TADS on their monthly invoice on the 25th of the month |
| Registration fee per family | $45.00* |
| *If you did NOT register for Lion’s Lair in TADS, please submit the $45 registration fee with this form |

- Time blocks are from 7-8, 8-9, 4-5, and 5-6 (4 maximum time blocks per day)
- Please use the cafeteria door for morning drop off and afternoon pick up.
- Parents need to come in and sign their child in, and also sign them out at pick up
- The “drop-in” fee applies to non-registered families only
- Lion’s Lair will be offered on non-school days if we have a minimum of 6 children registered for the day

Meals and Snacks
Snacks are provided after school to each student. Parents must provide a cold lunch and beverage on all non-school days.

Release of Children
If a person other than a parent or designated person is picking up your child, please notify staff by email at lionslair@nda-mn.org, or during Lion’s Lair hours you may call 952-388-6777. In emergencies, a parent must call to inform staff that an alternate person will be picking up. That person may be asked to show proof of identification. Please speak with the Director regarding any unauthorized individuals to inform staff of the risk of incident.

Field Trips
Occasionally during school breaks, Lion’s Lair will go on a field trip. Permission slips will be sent home to be signed for each activity. If a permission slip is not signed, your child will not be able to participate in off site activities. Field trips may require an additional payment due the day of the trip.

Illness & Accident
Lion’s Lair staff can administer prescription medication according to the written orders of a licensed physician and written authorization of the parent/guardian. Prescription medications must be in original container, labeled with child’s name and must not be expired. Medication will be kept in a locked box in the Director’s office. If a child becomes ill at Lion’s Lair, whenever possible, the child will be isolated from the other children and the parents will be called to pick up the child as soon as possible. In the event of an accident or emergency, the Lion’s Lair staff will provide first aid and when necessary, 911 will be called and parents will be contacted immediately.
Lions Lair Registration Form 2018-19

Complete and return this registration form to school office
(even if you already registered in TADS)

Mother’s Name: ___________________________ Father’s Name: ___________________________
Mother’s Phone 1: ___________________________ Father’s Phone 1: ___________________________
Mother’s Phone 2: ___________________________ Father’s Phone 2: ___________________________
Mother’s Email: ___________________________ Father’s Email: ___________________________
Address: __________________________________________________________
City/State/Zip: _______________________________________________________

Child #1
Name: ___________________________
Date of Birth: ___________________________
Grade: ___________________________
Male_______ Female__________

Child #2
Name: ___________________________
Date of Birth: ___________________________
Grade: ___________________________
Male_______ Female__________

Child #3
Name: ___________________________
Date of Birth: ___________________________
Grade: ___________________________
Male_______ Female__________

Child #4
Name: ___________________________
Date of Birth: ___________________________
Grade: ___________________________
Male_______ Female__________
EMERGENCY/MEDICATION INFORMATION

I understand that Notre Dame Lion’s Lair staff will administer minor first aid and will seek medical and/or dental assistance after reasonable efforts have been made to contact the parent or guardian. “Reasonable efforts” shall be defined on a case-by-case basis when viewed in light of the emergency at hand.

Parent or Guardian Signature: _____________________________________________

In the event of an emergency, if you are unable to be reached, Lion’s Lair will contact the following person who will be able to pick up your child and care for him/her if you are not available.

Name: ________________________________________________________________

Relationship: __________________________________________________________

Phone: ____________________________

OPTIONAL INFORMATION TO PROVIDE:

Physician

Name: ________________________________

Phone: _______________________________

Insurance Co.: ________________________

Policy Number: _______________________

Dentist

Name: ________________________________

Phone: _______________________________

Insurance Co.: ________________________

Policy Number: _______________________

Allergies/Medications

List any health issue that we should be aware of (be specific, as this form will be kept in the Lion’s Lair office):

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

List any individuals we should know about who are NOT AUTHORIZED to pick up my child:

Name: ________________________________ Relationship: ____________________

For Office Use Only:

$45 Registration Fee Paid:

TADS_____ Attached Check_____