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**2016-2017**



**NEW!**  
Late Start Monday  
Extended Care.  
\$9.50. See page 8.

The logo for AM & PM, featuring the letters "AM" and "PM" in large, bold, green font with yellow outlines. A white silhouette of a person running is positioned between the "M" and "P", with a yellow and orange arrow pointing upwards behind it.

**AM & PM**  
**BEFORE & AFTER**  
**SCHOOL CARE**

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**PARENT HANDBOOK**

**Enroll your kids to  
explore new experiences  
and expand learning in a  
supervised, safe  
and secure  
environment**

# AM/PM PROGRAM

The City of Peoria AM/PM Program gives parents the opportunity to have their children in a variety of activities before and after school as an alternate to daycare. The program provides a daily core schedule throughout the year, giving participants the opportunity to explore new experiences that will expand learning in a supervised, safe and secure environment.

**All students Kindergarten to 14 years old are eligible to enroll.**

*(Ira Murphy, Santa Fe, and Peoria Elementary will accept children 4 years old.)*

## No transportation or field trips provided during AM/PM

<b>WHERE &amp; WHEN</b>		
Peoria Unified Elementary Schools	A.M. 6 a.m. until school opens P.M. School dismissal to 6 p.m.	Telephone (623)
<b>Alta Loma</b>	9750 N. 87th Ave.	764-0282
<b>Apache</b>	8633 W. John Cabot Rd.	764-0293
<b>Cheyenne</b>	11806 N. 87th Ave.	764-0437
<b>Cotton Boll</b>	8540 W. Butler Dr.	764-0448
<b>Country Meadows</b>	8409 N.111th Ave	764-0584
<b>Coyote Hills</b>	21180 N. 87th Ave.	764-1065
<b>Desert Harbor</b>	15585 N. 91st Ave.	764-1072
<b>Frontier</b>	21268 N. 81st Ave.	764-1113
<b>Ira Murphy</b>	7231 W. North Ln.	764-1259
<b>Lake Pleasant</b>	31501 N Westland Rd	764-4928
<b>Oakwood</b>	12900 N. 71st Ave.	764-1120
<b>Oasis</b>	7841 W. Sweetwater	764-0791
<b>Parkridge</b>	9970 W. Beardsley Rd.	764-7172
<b>Paseo Verde</b>	7880 W. Greenway Rd	764-0815
<b>Peoria</b>	11501 N. 79th Ave.	764-1170
<b>Santa Fe</b>	9880 N. 77th Ave.	764-0875
<b>Sky View</b>	8624 W. Sweetwater	764-1261
<b>Sundance</b>	7051 W. Cholla	764-0881
<b>Sunset Heights</b>	9687 W. Adam Ave.	312-8973
<b>Sun Valley</b>	8361 N. 95th Ave.	764-1057
<b>Vistancia</b>	30009 Sunrise Point	764-7170
<b>Zuni Hills</b>	10851 W. Williams	764-1258

# HOW TO REGISTER

**Registration Form:** Complete, in detail, leaving no blanks, the Emergency and Information form, Fee Attendance Contract and provide a copy of child's immunization record. Children may not attend the program without this information.

**Payment:** A \$30 non-refundable registration fee is required for all new participants and participants of the 2015/16 AM/PM and 2016 Summer Camp who do not register before 6 p.m. on July 31. See below for registration acceptance locations, dates and times. All registrants must make full payment to start the program.

*Full payment includes: the first week of attendance,  
\$30 registration fee and \$59 deposit.*

## Where to register child:

- **AM/PM Recreation Program Sites:** August 10 - May 24, 2016. Contact the AM/PM staff Monday - Friday, 6 a.m. to school opening or school dismissal to 6 p.m.
- **Walk-In:** Through May 24, 2016  
City of Peoria Community Services Department  
9875 N. 85th Ave, Peoria, AZ 85345  
Monday - Thursday, 7 a.m. - 6 p.m.  
Peoria Community Center  
8335 W. Jefferson, Peoria, AZ 85345  
Monday - Thursday 8 a.m. - 8 p.m.  
Friday 8 a.m. - 5 p.m.
- **Mail-In:** Through July 14, if starting August 10.
- **School Open House / Meet The Teacher:** Check with school for dates and times.
- **Summer Camp Locations:** Monday - Friday, 6 a.m. to 6 p.m.  
Alta Loma, Cheyenne, Frontier, Paseo Verde, Sundance,  
Sunset Heights and Zuni Hills.  
Registration now available.

*Your child(ren) are registered and will attend the program the day(s) you indicate on the "Fee Contract". We will call only if there are questions regarding your registration.*

For more information call: (623) 773-7137 • TTY/TDD: (623)773-7221  
or visit [www.peoriaaz.gov/ampm](http://www.peoriaaz.gov/ampm)

## FEE INFORMATION

A **\$30 NON-REFUNDABLE** registration fee is required for all new participants. The registration fee will be *waived for returning* 2014-15 AM/PM participants and 2015 Summer Camp participants who provide *full payment with registration before Wednesday July 31 at 6 p.m.* See page 2 for registration locations, dates and times. Full payment of 1st week attendance fees plus a **\$59 deposit and a \$30 registration fee** (if applicable) is due at the time of registration.

PROGRAM	1 DAY	2 DAY	3 DAY	4 DAY	5 DAY
<b>AM*</b>	<b>\$6.50</b>	<b>\$13</b>	<b>\$19.50</b>	<b>\$26</b>	<b>\$32</b>
<b>PM**</b>	<b>\$9.50</b>	<b>\$19</b>	<b>\$28.50</b>	<b>\$38</b>	<b>\$47</b>
<b>AM/PM***</b>	<b>\$14.75</b>	<b>\$29.50</b>	<b>\$44.25</b>	<b>\$59</b>	<b>\$59</b>

\*includes breakfast

\*\*includes afternoon snack

\*\*\* includes breakfast & afternoon snack

### Payment Options

*New registrations will be accepted at the AM/PM sites with a check or money order only. Weekly payments will not be accepted at AM/PM school sites.*

- **Quick Pay:** Automatic payment from a credit or debit card – **authorization form required.**
- **Electronic Funds Transfer (EFT):** Automatic withdrawal from a checking account – **authorization form required with a voided check attached.**
- **Electronic Bill Pay:** Check if your bank offers online bill pay.
- **RecConnect:** Online payments accepted at [www.peoriaaz.gov/ampm](http://www.peoriaaz.gov/ampm). You will need your client ID and family password.
- **Community Services Offices:** Located at 9875 N. 85th Ave.  
Mon – Thurs, 7 a.m. – 6 p.m., except holidays (623) 773-7137.
- **Phone with customer service staff:** Call (623) 773-7505 or (623) 773-7139 with a credit or debit card, Mon – Thurs, 7 a.m. – 6 p.m. except holidays.

### Fee Assistance (Department of Economic Security)

Funding is available for low-income families. Contact DES at **(602) 771-0014** to find out more information on how to apply. Processing can take up to 30 days. Military assistance is also available. Call **623-773-7139** or 1-800-424-2246 for information.

**Tax I.D. 86-6003634**

# SCHEDULE, FEE & PAYMENT POLICIES

## Attendance Information

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It is the Peoria AM/PM Recreation Program policy that prior notice is required to terminate or change enrollment in the program. If for any reason you decide to change or drop your child's enrollment from the Peoria AM/PM Program, notification must be made in writing or on-line by Thursday for the following week and given to the Site leaders or the Peoria Recreation Division to make changes to your current contract. **NO REFUNDS OR CREDITS FOR MISSED/SICK DAYS, SUSPENSIONS, OR EARLY PICKUPS. Drop In Program:** Children who have inconsistent schedules and are not known by the Thursday prior to attendance may qualify for the drop in program. Regular schedules are not eligible. A regular schedule is consistent attendance or a pattern of attendance each week over one month. If my child displays a regular schedule over the course of two months, they will no longer be considered a drop in and fees will automatically begin being charged every Monday based on the weekly pattern that has been established. Payments not posted for the week of attendance will be charged a penalty fee of \$20 per child. After registering your child for AMPM, notify their teacher of the change in their pick-up schedule and whenever there is any change in their AMPM schedule.

## Absences

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If your child will not be attending the Peoria AM/PM Recreation Program as scheduled, call the AM/PM Recreation site prior to school dismissal. 24 hour voicemail available; leave a message. **Credit will not be issued for days missed.**

## Delinquent Accounts / Late Payment Fee

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The contracted fee (full time, part time or day by day and varying schedule) is based on days/week enrolled. Payment is due every week on **Monday** for the week of participation. A **penalty of \$20 per child will be assessed on Wednesday for payments not received.** Penalty fees will accrue weekly for any outstanding balances. If weekly/daily payment and late fees are not paid by the following Wednesday, the participant cannot attend until the account is paid in full.

## Returned Check Fee (RCF)

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A returned check will result in service/program interruption. **RCF of \$30 per check** and the amount of the returned check must be paid in cash, cashier's check, credit card or money order at Community Services Department or over the phone with a credit card by calling (623) 773-7137. All future payments will be required in cash, cashiers check, or money order for a period of six months from the date of the returned check.

# POLICIES & PROCEDURES

## Signing In & Out

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A child enrolled in the Peoria AM/PM Recreation Program will only be released to persons specifically authorized with their signature on the registration form. NO exceptions will be made without the advance written permission or telephone authorization from the parent or guardian. Individuals will be required to show a valid picture I.D. at the time of pick-up. **If there are custodial issues regarding a child**, current legal custody papers must be on file at the AM/PM site.

Participants must be signed in/out daily by a parent or authorized person. This is done by signing your full name and time. Children may not sign themselves in or out of the program. The AM/PM site staff is authorized to sign the child out and release the child to the school. For the PM sessions, staff will sign them in.

## Late Pick up Fee

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A \$15 fee per child will be assessed for every 15 minutes past 6 p.m.  
6:01 p.m. - 6:15 p.m.: \$15; 6:16 p.m. - 6:30 p.m.: \$30, etc. Pick-up time will be recorded by the designated site clock.

### Fee assessment

- 1st** - incident will result in verbal warning with review of policy
- 2nd** - incident will result in FEE plus written warning
- 3rd** - incident will result in FEE plus a three-day suspension
- 4th** - incident will result in FEE plus a one-week suspension
- 5th** - incident will result in FEE plus removal from the program

## Health & Emergency Procedures

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If a child becomes ill during the program, the child will be placed in an isolated area. According to the time of day and the degree of illness, the site director will decide to call the parents and make arrangements to have the child taken home by an authorized person (not a staff member) or keep them at the AM/PM Site. Don't send a child if he/she missed school or displays any of the following symptoms; nausea, rashes, red/inflamed eyes, temperature above 99° without medication, or cold symptoms within the past 24 hours. Minor scratches and cuts will be treated at the site. If a serious accident should occur, the City of Peoria Fire Department will be summoned for treatment and will decide whether a child should be taken to the nearest hospital or doctor's office by ambulance. Parents will be notified immediately. Treatment may only be rendered if written authorization is on file.

## Medication

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For staff to administer medication, parent/guardian must complete a "Medication Release Form" available at the site and bring the prescribed amount of medication in the original container. **If necessary, sunscreen must be applied by the child's parent not staff, including Break Care days.**

# POLICIES & PROCEDURES

## Discipline

Staff will implement an assertive discipline program. Children are expected to follow the rules and directions from AM/PM staff. The following guidelines are used when disciplinary action becomes necessary due to unacceptable behavior. Parents will be notified if a child needed guidance or discipline.

1. **Warning** - For specific unacceptable behavior
2. **Time-out** - with a warning of future consequences for repeated behavior.
3. **Time-out** - with a warning and/or write up for repeated behavior in file and parent notified upon pick-up.
4. **Time-out** - with a call to parent or guardian and a write-up like above. Discuss corrective action and consequences for future incidents with parent upon pick-up.
5. **Suspension** - One to five scheduled days from the program and/or the remainder of the day.  
*Repeated aggressive/inappropriate behavior with three to five suspensions will result in removal from AM/PM with approval from supervisor.*  
(No refund for suspensions)

**Extreme behaviors will accelerate the process and be dealt with on a case by case basis:** Physical attacks such as hitting, biting, spitting, kicking, etc.; abusive language; disrespect to staff (verbally or physically by child or parent); attempts to leave or leaving the program area without permission; repeated offenses within the same day or those behaviors that put a child or others in danger.

*The Community Services Director reserves the right to remove a participant from the program at any time; if this occurs, the City will provide a full refund of the program fees that were paid the week the participant was removed.*

## Parent / Staff Communications

Staff works as a team with the school and family to provide the best environment for the child's growth and development. Exchanges of information between parents and staff will be a formal or informal format. Information will be shared regarding issues in school, AM/PM or any changes occurring within the family, e.g. a sibling moving, a sick relative or pet, alterations in the parents' relationship, give insight to a child's behavior or attitude.

## Personal Electronic Device Policy

The City of Peoria understands that many parents have chosen to provide their children with personal electronic devices, including cell phones, camera phones, text messaging devices, tablets, iPads, etc. However, with this privilege comes responsibility. The Personal Electronic Device Policy is intended to preserve and respect safety measures, as well as, the recreational environment of all our participants. The policy outlined below will be enforced at all City of Peoria youth programming sites.

- Participant electronic devices may only be used during designated times/areas.
- Cell phone calls may only be made with staff permission.
- Sharing of personal electronic devices during program times is prohibited. This includes viewing of other participant devices.
- Participant misuse of personal electronic devices (cell phones, camera phones, text messaging devices, tablets, ipads, etc.) may result in loss of this privilege and/or disciplinary action.
- Participants discovered watching or searching inappropriate material on personal electronic devices will receive behavior write-ups that could lead to program suspension or expulsion.
- The City of Peoria is not responsible for any lost or stolen personal items including personal electronic devices.

## POLICIES & PROCEDURES (cont.)

### Personal Items

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The program provides a variety of toys and activities to keep children busy and entertained. The city of Peoria is not responsible for personal items brought to site. PLEASE SEE PAGE 6 FOR THE PERSONAL ELECTRONIC DEVICE POLICY.

### AZ Dept Of Health Services (DHS) Licensing

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PAPRP is regulated by DHS, located at 150 N. 18th Ave. Phoenix, AZ, 85007, (602) 364-2539. Inspection reports are available upon request and are located in the Black Book at each AM/PM location.

### Insurance

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The city of Peoria carries liability insurance for all its operations, including city-sponsored recreation programs. However, the city does not carry medical insurance for any participant's injuries or illnesses associated with any specific recreational activity. Medical claims are your responsibility.

### Pesticide Notice

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The pesticide application schedule for each school will be posted on the parent board 48 hours in advance.

## DAILY SCHEDULE

### Typical AM Schedule

*(Bold denotes schools with early dismissal time)*

6:00 a.m.: AM/PM Site opens; check in with site leaders.

6:00 a.m. - **7:45** / 8:15 a.m.: Organized games and/or homework time.

**7:45** / 8:15 a.m. - **School Opens**: Breakfast and release to playground with school staff supervision.

### Typical PM Schedule

*(Bold denotes schools with a 3:00 p.m. dismissal time)*

**3:00** / 3:40 p.m. - **3:20** / 4:00 p.m.: Check-In

**3:20** / 4:00 p.m. - **3:50** / 4:30 p.m.: Snack time

**3:50** / 4:30 p.m. - 5:30 p.m.: Core activity choices or homework time.

5:30 pm / 6:00 pm - **All Schools**: Free play or homework time

## HOLIDAYS & BREAK CARE

All program sites will be CLOSED on the following holidays:

**Labor Day** - September 6

**Thanksgiving** - November 24-25

**New Year's Day** - January 1

**President's Day** - February 20

**Veteran's Day** - November 11

**Christmas Day** - December 25

**Martin Luther King Day** - January 16

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### Break Care Camp

Break Care Camp will be provided during Breaks and Professional Development Days. 6 a.m. - 6 p.m. — *\$25 per day, per child*. For details, visit [www.peoriaaz.gov/breakcamps](http://www.peoriaaz.gov/breakcamps).

**September Break** - September 6

**Columbus Day Break** - October 10

**November Break** - November 21-23

**Winter Break** - December 23-31, Jan 2-6  
(No program December 25 or January 1)

**January Break** - January 17

**February Break** - February 21

**Spring Break** - March 17, 20-24

**April Break** - April 14, 17

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### Late Start Mondays

Beginning the Fall 2016 school year, the AM/PM program will provide before school care for late start school days throughout the school year at all PUSD schools located within the City of Peoria. A one-time registration fee of \$5 is required for non-AM/PM participants. Participants enrolled *consistently* five days a week in the AM program will not be charged an additional fee. Participants enrolled 0-4 day schedule pay \$9.50 for AM program that day. The schools' late start dates are Aug. 22, Sept. 26, Oct. 24, Nov. 7, Dec. 12, Jan. 30, March 6, April 24 and May 8.

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### Early Release Day

The AM/PM Program will provide childcare on the scheduled school professional development days at time of release at 11:00/11:40 am. Days will vary for each school. Participants enrolled 5 days a week in the full PM program (school dismissal until 6 pm) *consistently* will not be charged an additional fee. All 0-4 day schedules will pay a \$14.50 fee for the PM program that day. Lunch will not be provided on these days. ***Children are required to bring a non-perishable lunch.***

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### Parent Teacher Conference Days

Children will be released at 10:00/10:40 a.m. from school. AM/PM will be available at that time. Participants enrolled 5 days a week *consistently* in the full PM program (school dismissal until 6 p.m.) will not be charged an additional fee. All 0-4 day schedules will pay a \$14.50 fee for the PM program that day. ***Children are required to bring a non-perishable lunch.***



## OTHER PROGRAMS

### Lil' Learners Pre-School

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Location: Sunrise Mountain Family Center, 21303 N. 86th Dr.  
Dates:\* Year round Time: 6 a.m. – 6 p.m., Monday-Friday  
Cost: Full Time: \$125 per week, Part Time: \$90 per week  
*For details, visit [www.peoriaaz.gov/preschoolprograms](http://www.peoriaaz.gov/preschoolprograms)*

### Tiny Tots Summer Recreation Program

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Dates:\* May 26-July 26 Time: 8 a.m. - 2 p.m., Monday-Friday  
This program is for preschool-age children, ages 4 and 5, and offers on-site activities, special lunches and, of course, weekly field trips. All participants must complete the registration form, an emergency and information card, provide a copy of child's immunization records and birth certificate in order to attend the program. *For details, visit [www.peoriaaz.gov/summeryouthprograms](http://www.peoriaaz.gov/summeryouthprograms)*

### Summer Recreation (Grades 1-5)

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Location: Available at schools throughout Peoria  
Dates:\* May 26-July 16 Time: 8 a.m. - 2:30 p.m., Monday-Friday  
Drop in care with daily activities, group games and planned field trips for an additional fee. *For details, visit [www.peoriaaz.gov/summeryouthprograms](http://www.peoriaaz.gov/summeryouthprograms)*

### Summer Camp

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Dates:\* May 25-August 3 Time: 6 a.m. - 6 p.m., Monday-Friday  
All day licensed childcare for ages 5-14.\* Field trips provided each week along with special instructors, activities and group games. *For details, visit [www.peoriaaz.gov/summeryouthprograms](http://www.peoriaaz.gov/summeryouthprograms)*

### STEP OUT Teen Program (Grades 6-9)

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Dates:\* May 31-July 21 Time: 8 a.m. - 2:30 p.m., Monday-Friday  
Drop in program with daily\* activities, group games and planned field trips for an additional fee. *For details, visit [www.peoriaaz.gov/teenteam](http://www.peoriaaz.gov/teenteam)*

*\*NOTE: All programs closed July 4. Dates are subject to change.*

### Special Accommodations

Parents of a child with a disability may request a reasonable accommodation by completing and submitting a "REQUEST FOR ACCOMMODATION" form, along with supporting documentation. Forms will be reviewed by a Certified Therapeutic Recreation Specialist and can take at least 2-3 weeks to assign or hire a staff. Life Skills such as, but not limited to, feeding, dressing and toileting are not provided by staff. For more information, you may contact Kathleen Kresl at 623-773-7108.

*For current information on these or other programs, see the current issue of GetActive, call 623-773-7137 or visit us at <http://recreation.peoriaaz.gov>.*



# CITY OF PEORIA 2016-2017 AM/PM FEE ATTENDANCE CONTRACT

MY CHILD	IS ATTENDING THE AM/PM SITE BELOW (SCHOOL NAME)	CHILD'S GRADE
PARENT/GUARDIAN NAME	ADDRESS	
MAIN PHONE	WORK PHONE	
PARENT/GUARDIAN NAME	ADDRESS	
MAIN PHONE	WORK PHONE	
FAMILY EMAIL ADDRESS		START DATE
		WITHDRAWAL DATE

SCHEDULE <i>Check all days attending</i>	MON	TUES	WED	THURS	FRI	PRICE	WEEKLY PRICE <i>(Price times # of days)</i>
<b>AM</b> 6 AM Until - School opens	<input type="checkbox"/>	\$6.50/day or \$32/M-F	\$				
<b>AM/PM</b> Both morning & afternoon	<input type="checkbox"/>	\$14.75/day or \$59/M-F	\$				
<b>PM</b> School dismissal - until 6 PM	<input type="checkbox"/>	\$9.50/day or \$47/M-F	\$				
<b>TOTAL WEEKLY COST</b>							<b>\$</b>

**Drop In:** For irregular, inconsistent attendance ONLY. *Restrictions apply. Daily fees are required on day of attendance or credit must be available on your account. One day attendance, plus deposit is required. Please read policies regarding Drop In Program in parent handbook.* \$30 registration fee required.

**Late Start Mondays Drop In:** A one-time registration fee of \$5 is required for non-AM/PM participants. Participants enrolled consistently five days a week in the AM program will not be charged an additional fee. Participants enrolled 0-4 day schedule pay \$9.50 for AM program that day.

PERMISSIONS		FEE PAYMENT
<p><b>Photo Permission:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO I give permission for my child to be video taped or photographed by the City of Peoria employees or established area media for the free use of my child's name and picture for site activities or should they appear in broadcast, newspapers or any brochure, etc.</p>	<p><b>Sunscreen:</b> I understand sunscreen must be applied by a Parent/Guardian as needed prior to attending AM/PM Prg. or Break Camps. Initial: _____</p>	<p style="text-align: center;"><b>After registering your child for AMPM, notify their teacher the change in their pick-up schedule and whenever there is any change in their AMPM schedule.</b></p>
		First Week's Participation Fee: \$
		Deposit: \$ 59
		Additional week(s): \$
		Program Registration Fee: \$30: Drop In Late Start Monday Registration Fee: \$5: <i>(Non-Refundable)</i>
		<b>TOTAL ENCLOSED</b> <i>Make checks payable to "City of Peoria"</i> \$

### WAIVER OF LIABILITY

*I/we hereby release and forever discharge Peoria Unified School District and the City of Peoria, an Arizona municipal corporation, its elected and appointed officials, directors, officers, boards, commissions, agents, representatives, servants, and employees, and any and all other persons, firms, or corporations who are or might be liable, from any and all claims of any kind or character which I/we have or may have against them due to my child's participation, in a City of Peoria Recreation Program. This waiver includes all damages, losses, costs, expenses, and injuries that allegedly occur during the course of this recreation program. In that regard, I/we covenant to indemnify, defend, and hold harmless to the fullest extent permitted by law the foregoing persons and entities from any loss or damages, including reasonable attorney's fees and litigation expenses, which may be incurred by them in the event any such claims are asserted against them or any of them. I/we understand that medical claims are my/our responsibility. This waiver does not extend to any such claim or liability that is caused by the sole and exclusive intentional acts or gross negligence of the City of Peoria or its officers, employees, or agents.*

**By signing below, I attest that I have read and agree to abide by the payment policies listed on the policies page of this registration packet and that I have received a copy of and will abide by the policies and guidelines outlined in the AM/PM Parent Handbook. I also understand that AMPM Staff may sign my child in and out of the program as needed, i.e room changes during program hours.**

PRINT NAME	SIGNATURE OF RESPONSIBLE PARTY	DATE
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<b>STAFF USE ONLY</b> <i>Staff, complete upon accepting registration at site)</i>	Date: _____	<input type="checkbox"/> Cash	<input type="checkbox"/> Check # _____	<input type="checkbox"/> Money Order _____
	Print Staff Name: _____	Amount Paid \$ _____		

- **REGISTRATION**

A completed Fee Attendance contract, Emergency & Immunization Information form and a copy of your child's shot records are required. There is a \$30 non-refundable registration fee required for all new participants, along with a \$59 deposit and the first week attendance. All participants must make full payment of registration fees to attend the program.

The contracted fee (full time, part time regular and varying schedules or drop in schedules) is based on days/week enrolled, and that payment is due every week on **Monday** for the week of participation. **A penalty of \$20 per child will be assessed on Wednesday for payments not received.** If weekly/daily payment and late fees are not paid by the following Wednesday, the participant cannot attend until the account is cleared of all charges.

- **EARLY RELEASE DAYS**

AM/PM will provide childcare on the scheduled professional development days at time of release at 11:00/11:40am. Days will vary for each school. Participants enrolled 5 days a week in the full PM program **consistently** will not be charged and additional fee. All AM and part-time PM participants will be charged \$14.50 on the early release day for PM care only.

- **DROP IN PARTICIPANTS**

For those parents/guardians who have inconsistent schedules or schedules not known by the Thursday prior to attendance, you may choose the drop in program. Regular schedules are not eligible for drop in status. **A regular schedule is defined as consistent attendance or pattern of attendance over the course of one month. ALL PAYMENTS MUST BE RECEIVED ON OR PRIOR TO THE DAY OF ATTENDANCE.** You may also choose to keep a credit balance for future use at all times. **Any payments not received by day of attendance, you will be charged a penalty fee of \$20 per child.** Penalty fees will accrue weekly for any outstanding balances. If payment and late fees become two weeks past due, the participant cannot attend until the account is paid in full.

- **LATE START MONDAYS**

Beginning the Fall 2016 school year, the AM/PM program will provide before school care for late start school days throughout the school year at all PUSD schools located within the City of Peoria. A one-time registration fee of \$5 is required for non-AM/PM participants. Participants enrolled consistently five days a week in the AM program will not be charged an additional fee. Participants enrolled 0-4 day schedule pay \$9.50 for AM program that day. The schools' late start dates are Aug. 22, Sept. 26, Oct. 24, Nov. 7, Dec. 12, Jan. 30, March 5, April 24 and May 8.

- **PAYMENT OPTIONS**

**Weekly payments will not be accepted at AM/PM school sites. New registrations will be accepted with a check or money order only.**

1.	<b>Auto Payment/Quick Pay:</b>	Automatic payment from a credit or debit card <b>AUTHORIZATION FORM REQUIRED</b>
2.	<b>Auto Payment / Electronic Funds Transfer (EFT):</b>	Automatic withdrawal from a checking account <b>AUTHORIZATION FORM REQUIRED.</b>
3.	<b>Electronic Bill Pay:</b>	Many banks offer on-line bill pay. Check with your bank for this option.
4.	<b>Online/RecConnect:</b>	<a href="http://www.peoriaaz.gov/ampm">www.peoriaaz.gov/ampm</a> Available 24/7. You will need your Client ID and Family Password
5.	<b>Community Services Offices:</b>	Located at 9875 N. 85 <sup>th</sup> Ave. Customer Service Staff are available Monday – Thursday from 7 a.m. – 6 p.m. except Holidays
6.	<b>Phone with Customer Service Staff:</b>	Call 623-773-7505 or 623-773-7139 with a credit or debit card Monday – Thursday from 7 a.m. – 6 p.m. except Holidays

- **SCHEDULE CHANGES**

It is the Peoria AM/ PM Recreation Program policy that prior notice is required to terminate or change enrollment in the program. If for any reason you decide to change or drop your child's enrollment from the Peoria AM/PM Recreation Program, notification must be made **in writing by Thursday for the following week** and given to the Site leaders or the Peoria Recreation Division to release you from your current contract. Schedule changes may also be submitted on-line at [www.peoriaaz.gov/ampm](http://www.peoriaaz.gov/ampm) **NO REFUNDS OR CREDITS FOR SICK/MISSED DAYS, SUSPENSIONS, OR EARLY PICKUPS**

- **ABSENCES**

If your child will not be attending the Peoria AM/PM program as scheduled, you must call the AM/PM Recreation Site prior to school dismissal. 24 hour voicemail is available. **There is no credit for sick or missed days**

- **RETURNED CHECKS**

A returned check or declined EFT payment will result in service/program interruption. A returned check fee of \$30 per check/EFT and the amount of the returned check/EFT must be paid in cash, cashier's check, credit card or money order at the Community Services Offices or over the phone with a credit card by calling 623-773-7139. All future payments will be required in cash, credit card, cashiers check or money order for a period of six (6) months from the date of the returned check.

- **AUDITS**

Monthly audits of daily sign-in/sign-out sheets will be performed for each site. Any extra days of attendance not originally scheduled per this attendance contract will be the responsibility of the parent/guardian and subject to late/penalty fees as described above.

**Call (623) 773-7137 for general information.**  
**For billing information and/or questions, call (623) 773-7505 or**  
**623-773-7139 e-mail: [AMPMBillingStaff@peoriaaz.gov](mailto:AMPMBillingStaff@peoriaaz.gov)**

# AM/PM DROP IN PARTICIPANT FORM

## DROP IN PARTICIPANTS

For those parents/guardians who have inconsistent schedules and/or schedules not known by the Thursday prior to attendance, you may choose the Drop in program. Regular schedules are not eligible for drop in status. A regular schedule is defined as consistent attendance or a pattern of attendance over the course of one month.

An example of a regular/ consistent schedule could be PM two days a week every week, even if they are not the same day.

**ALL PAYMENTS MUST BE RECEIVED ON OR PRIOR TO THE DAY OF ATTENDANCE.**

You may also choose to keep a credit balance for future use at all times. Any payments not posted for the each day of attendance will be charged a penalty fee of \$20.00 per child. Penatly fees will accrue weekly for any outstanding balances. If payment and late fees are not paid, the participant cannot attend until the account is paid in full.

I understand that my child's/children's attendance will be audited on a regular basis and that if my schedule becomes consistent over the course of one month, the schedule will no longer be considered a drop in and fees will automatically be charged every Monday based on the pattern that has been established.

Child/Children's Names: \_\_\_\_\_  
\_\_\_\_\_

AM/PM School Name: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



## PARTICIPANT ELECTRONIC DEVICE POLICY



Parents/Guardians,

The City of Peoria understands that many parents have chosen to provide their children with personal electronic devices, including cell phones, camera phones, text messaging devices, tablets, ipads, etc. However, with this privilege comes responsibility. The Participant Electronic Device Policy is intended to preserve and respect safety measures, as well as, the recreational environment of all our participants. The policy outlined below will be enforced at all City of Peoria youth programming sites.

- Participant electronic devices may only be used during designated times/areas.
- Cell Phone calls may only be made with staff permission.
- Sharing of personal electronic devices during program times is prohibited. This includes viewing of other participant devices.
- Participant misuse of personal electronic devices (cell phones, camera phones, text messaging devices, tablets, ipads, etc...) may result in loss of this privilege and/or disciplinary action.
- Participants discovered watching or searching inappropriate material on personal electronic devices will receive behavior write-ups that could lead to program suspension or expulsion.
- The City of Peoria is not responsible for any lost or stolen personal items.

By signing below, I am acknowledging that I read and understand the guidelines outlined above and agree that any participant enrolled in a youth program will follow the Participant Electronic Device Policy.

\_\_\_\_\_  
Participant Print

\_\_\_\_\_  
Parent/Guardian Print

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**NOTE: A new form is required each school year.**

CDC/SGH# or name: \_\_\_\_\_



**Arizona Department of Health Services  
Bureau of Child Care Licensing  
Emergency, Information and Immunization Record Card**

<b>Child's Name:</b>	<b>Date Enrolled:</b>	<b>Updated:</b>
<b>Home Address (#, Street, City, State, Zip Code):</b>		<b>Date Disenrolled:</b>
<b>Home Phone:</b>	<b>Date of Birth:</b>	<b>Sex:</b> <input type="checkbox"/> male <input type="checkbox"/> female

<b>Mother or Guardian Name:</b>	<b>Home Address (#, Street, City, State, Zip Code):</b>
<b>Cell Phone (optional):</b>	<b>Contact Telephone Number:</b>

<b>Father or Guardian Name:</b>	<b>Home Address (#, Street, City, State, Zip Code):</b>
<b>Cell Phone (optional):</b>	<b>Contact Telephone Number:</b>

**I authorize the following individuals to collect my child from the facility in case of emergency or if I cannot be contacted:  
(Pursuant to R9-5-304.B, at least two contact persons are required.)**

<b>Name:</b>	<b>Contact Telephone Number:</b>

If Medical care is necessary, call:

<b>Health Care Provider*</b>	<b>Name:</b>	<b>Contact Telephone Number:</b>
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\*A Health Care Provider is a physician, physician assistant or registered nurse practitioner.

<b>In case of injury or sudden illness, I request that this individual be called first:</b>	
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The following individual(s) may NOT remove my child from the facility:

<b>Name(s):</b>
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Custody papers have been provided and are on file at the facility.  yes  no

Telephone Authorization Code (optional): \_\_\_\_\_

**Immunization Information**

(A licensee shall attach an enrolled child's written immunization record or exemption affidavit to the enrolled child's Emergency, Information and Immunization Record card.)

For information regarding current immunization requirements go to:

[www.azdhs.gov/phs/immun/index.htm](http://www.azdhs.gov/phs/immun/index.htm) or contact the Arizona Immunization Program Office at (602)364-3630.

One of these items must accompany the EIIR card at all times:

<input type="checkbox"/>	Copy of current official documented immunization record attached
<input type="checkbox"/>	Religious Beliefs exemption form signed by parent/guardian attached
<input type="checkbox"/>	Medical Exemption form signed by physician and parent/guardian attached
<input type="checkbox"/>	Signed Laboratory Proof of Immunity form attached

Notification of immunizations needed sent to Parent(s) or Guardian(s):	mo /day/ yr	mo /day/ yr	mo /day /yr
Updated immunizations received and attached:	mo /day/ yr	mo /day/ yr	mo /day /yr

**Medical Information**

<p>Is child allergic to food or other substances? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, describe symptoms, name foods or substances to be avoided, and the procedure to follow if reaction occurs:</p>
<p>Is child usually susceptible to infections and if so, what precautions need to be taken? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, list precautions:</p>
<p>Is child subject to convulsions and what should be our procedure if one occurs? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, specify procedure:</p>
<p>Is there any physical condition that we should be aware of and what precautions should be taken (heart trouble, foot problem, hearing impairment, hernia, etc.)? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, list precautions:</p>
<p>Additional comments:</p>
<p>Other special instructions:</p>

This **Emergency Information and Immunization Record Card** is accurate and complete, front and back, and was provided by:

Parent/Guardian PRINTED Name:	SIGNED Name:	DATE:
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# Auto Payment Form- Quick Pay/EFT

Pay your weekly childcare fees automatically every Monday with your debit/credit card OR voided check. **This payment method is for Set Schedules Only (Not for Drop In schedules).** This is a *FREE* service. Please complete the information below and return to your AM/PM location or main office at 9875 N. 85th Ave., Peoria AZ 85345 Monday-Thursday, 7 a.m. to 6 p.m.

Child's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Parent(s) Home / Cell #: \_\_\_\_\_

Amount to be charged weekly based on Fee Contract: \$\_\_\_\_\_

Yes  No (Check one) I authorize to charge my Card / EFT for any additional fees, ex: extra days attended, special lunches, early release fees, late pick up charges, etc. \_\_\_\_\_ (initials)

**\*\*Date of First Charge / Bank Draft:** \_\_\_\_\_

## DEBIT / CREDIT CARD INFORMATION

Name as it appears on Card: \_\_\_\_\_

Cardholder's Home/Cell #: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date on Card: \_\_\_\_\_

## EFT / BANK DRAFT INFORMATION

**If you would like to sign up for EFT, please write the account and routing number below OR attach a voided check.**

\_\_\_\_\_ (Name as it appears on check)

\_\_\_\_\_ (Routing Number)

\_\_\_\_\_ (Account Number)

You are hereby authorized and requested, until otherwise instructed to charge the above referenced account, the weekly attendance fees. I understand that if a card transaction is DECLINED, a courtesy phone call will be attempted at the numbers listed above. I further understand that I am responsible for the payment and I am aware that if the card transaction is declined and payment is not made by the due date, a \$20 late payment fee will be applied and will not be waived. I am aware if the EFT transfer is unsuccessful, a "\$30 Return Check Fee" will apply. If the payment is not made by the due date, a \$20 late payment fee will also apply. I further understand that the staff reserves the right to cancel my Auto Payment.

**I understand that a request to discontinue or change this service must be made in writing Thursday PRIOR to the week of the change.** It can be turned in to the AMPM site leader or the Community Services office at 9875 N. 85th Ave., Peoria AZ. Office Hours: Mon-Thurs from 7 a.m. to 6 p.m. **Fax: 623-773-7180**

Account Holder Signature \_\_\_\_\_

Date \_\_\_\_\_



# 2016-17 AMPM Quick Pay/EFT Auto Payment Change Form

School Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Home/Cell Phone # \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Day Time Phone # \_\_\_\_\_

## All schedule changes need to be submitted the Thursday prior to the week of the change.

I would like to **stop** using Quick Pay/EFT.

Make \_\_\_\_\_ (date) the last deduction.

I am **Withdrawing** (check one):  Yes  No Last Day Attending Program: \_\_\_\_\_

Change the **Checking account** that I am using.

Attach a voided check OR fill out following information:

Routing Number: \_\_\_\_\_ Accounting Number: \_\_\_\_\_

Change the **debit / credit card** I am using.

Please start using card number: \_\_\_\_\_ EXP \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

**Temporary Absence**

My child will be out beginning \_\_\_\_\_ (date) and return on \_\_\_\_\_ (date)

**New Schedule**

My child's new schedule will be the following starting on \_\_\_\_\_ (date)

Please change my weekly payment amount to \$ \_\_\_\_\_

Yes  No (check one) I authorize to charge my card for any additional fees, (ie: additional days attended, special lunches, early release fees, late pick up charge, etc. \_\_\_\_\_ (initials)

### New Schedule and Payment (circle days and payment)

<b>AM</b>	M	T	W	TH	F	<b>\$6.50/day</b>	<b>OR</b>	<b>\$32/week (Monday-Friday)</b>
<b>PM</b>	M	T	W	TH	F	<b>\$9.50/day</b>	<b>OR</b>	<b>\$47/week (Monday-Friday)</b>
<b>AM/PM</b>	M	T	W	TH	F	<b>\$14.75/day</b>	<b>OR</b>	<b>\$59/week (Monday-Friday)</b>

You are hereby authorized and requested, until otherwise instructed, to charge/deduct from the above referenced account the weekly attendance fee. I understand that if a DEBIT/CREDIT CARD transaction is DECLINED, a courtesy phone call will be attempted at the numbers listed above. I further understand that I am responsible for the payment and I am aware that if the transaction is declined/unsuccessful and payment is not made by the due date, penalties will be applied and will not be waived. For EFT participants, this will include a "Return Check Fee." I further understand that the staff reserved the right to cancel my "Quick Pay/EFT" account. **I understand that a request to discontinue or change this service must be made in writing Thursday prior to the stop date and given to the Site Leader or the Community Services office at 9875 N. 85th Ave., Peoria, AZ 85345, Monday-Thursday from 7 a.m. to 6 p.m.**

Parent Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_