

Community Learning Center

Early Riser Program

Bardonia, Lakewood, Little Tor, West Nyack & Woodglen Elementary Schools
2022 – 2023 School Year

The Early Riser program is a before school childcare program. It is designed to be a safe place for parents/guardians to bring their children in the morning. It is staffed by CCSD employees and is available every school day except weather delay days. Children are provided with activities such as arts & crafts, board games, and in some schools, time in the gym. Children can eat breakfast at home, bring it with them or purchase it using their lunch account through MySchoolbucks.

Guidelines for the program:

1. All children must be registered for the program before they can attend.
2. Children must be signed in by staff upon entry.
3. Children who exhibit any symptoms of illness will be sent home.
4. Behavior that is disruptive or dangerous will not be tolerated. The child will be removed from the program permanently.
5. Parents/Guardians only pay for the days that children attend the program. Attendance will be tallied up at the end of the month and parents/guardians will receive an invoice via mail or email. Payment is expected by date due on the invoice. Any account that remains in a negative balance will cause the child/children to not be allowed to attend the program.
6. Bardonia, Lakewood, Little Tor, West Nyack, and Woodglen Elementary Schools open at 6:45 am and the cost per day is \$8 for the first child and \$5 for each additional sibling.

How to register:

1. See the second page of this flyer.
2. Fill in all requested information. Please print or type clearly. This is how we will reach you in an emergency.
3. Mail the form to the Community Learning Center, 9 Lake Road, Congers, NY 10920 or email it to Shauna Butler at sbutler@ccsd.edu

If you need more information, please contact Marion Arbuco or Shauna Butler by phone at 845-639-5628. You may also email Shauna at sbutler@ccsd.edu.

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Early Riser Program Registration Form 2022-2023

Child's Name: _____ Grade: _____

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Parent/Guardian 1: Name: _____

Cell Phone: _____ Email: _____

Mailing Address: _____

Parent/Guardian 2: Name: _____

Cell Phone: _____ Email: _____

Mailing Address: _____

School (Circle One): Bardonia Lakewood Little Tor West Nyack Woodglen

Emergency Contact other than parent:

Name: _____ Cell Phone: _____

Do any of the children have allergies? _____ Which child? _____

What is he/she allergic to? _____ Epi Pen? _____

Do any of the children take medication regularly or have a medical condition that we

should be aware of? _____ Which child? _____

What medication? _____ Medical condition? _____

Parent/Guardian signature: _____

Please Note: If the cost of the program is to be split between parents/guardians, written notification by both parties needs to be sent to sbutler@ccsd.edu. Invoices will be sent to both parties and split 50/50 in this case.