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| \\dms-ms10\users\syfretts\My Pictures\Deerlake-Crest-LH2.jpg | **Deerlake Middle School****9902 Deer Lake West****Tallahassee, FL 32312**Office (850) 922-6545Guidance (850) 922-6990Fax (850) 488-3275 | **Principal***Stephen Mills***Assistant Principal***Sherrhonda Faison***Assistant Principal***Robin Oliveri***Assistant Principal***Taita Scott* |

**2024-2025 BUCKS BEFORE SCHOOL APPLICATION**

The before school program is designed for all students who are looking for fun morning activities before school, and it is perfect for parents looking for a dependable before school care program. All activities are supervised by Deerlake Middle School teachers and staff.

**EDEP Hours:** Supervision begins at 7:15 am; you may drop your child off any time after 7:15

**Location:** Students are to meet in the Learning Commons each morning. Drop off will be in the circle in front of the gym (for full time participants - it is not necessary to escort your child into the drop off area).

**Tuition: Each cycle payment is $125 per session and is due one day prior to the start of each cycle (late fees will be applied if payment is not made on time)**. Payments can either be paid through the e-Funds portal or by check/money order payable to “Leon County Schools” (we do not accept cash). Drop-ins welcome at a $10 fee per day, due prior to or on the day of drop-in. **The first cycle fee must be paid by check/money order.**

**Get Reminders:** Join our Before School Remind to get payment reminders and to receive updates on alternate drop off locations (when applicable). Text @dmsbefore to 81010 to join.

**Discipline Policy:** Our before school will not tolerate discipline concerns. Students will be given a warning for the first offense, a parent will be contacted for the second offense, and students will be removed for the reminder of the billing cycled. The fees will be forfeited if a student is removed for disciplinary reasons.

\*\*By registering your student(s) you agree to have your student sign himself/herself in every morning

**Deerlake’s Before school**

**Session Payments Due Date**

|  |  |  |
| --- | --- | --- |
|  | **Session Dates:** | **Payment Due Date:** |
| **Session 1:** | August 12th – September 5th  | When you register |
| **Session 2:** | September 6th – October 1st  | Thursday, September 5th |
| **Session 3:** | October 2nd – October 29th  | Tuesday, October 1st |
| **Session 4:** | October 30th – December 2nd | Tuesday, October 29th |
| **Session 5:** | December 3rd – January 13th  | Monday, December 2nd |
| **Session 6:** | January 14th – February 7th  | Monday, January 13th |
| **Session 7:** | February 10th – March 6th  | Friday, February 7th |
| **Session 8:** | March 7th – April 9th  | Thursday, March 6th |
| **Session 9:** | April 10th – May 6th  | Wednesday, April 9th |
| **Session 10:** | May 7th – May 23rd \*\*Prorated 13 day | Tuesday, May 6th (Total: $90.28) |

**Late Payment Policy**

Payments are due one day prior to the start of each cycle (see dates above). All payments must be in the form of a check, money order, or made through our e-funds portal. If payments are not received by the start of each cycle, **a $10 late fee** will be assessed and students may not be permitted to attend until payment has been received. Failure to pay on time could result in dismissal from EDEP program.

If you have any other questions or concerns, please contact LaNandra Watkins at watkinsl@leonschools.net

**Deerlake Middle School Before School / Afterschool**

**2024-2025 Registration Form**

**Child’s Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Grade**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Contact Information:** |
| Guardian #1 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Guardian #2 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Relationship to Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Relationship to Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Daytime Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Daytime Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Emergency Contact & Permission to Drop Off/Pick Up for your child (if different from above):

|  |  |  |
| --- | --- | --- |
| Name | Daytime Phone | Relationship to Student |
|  |  |  |
|  |  |  |
|  |  |  |

List any information about your child that we may need to be aware of (***including food or other allergies***): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_ I would like to register my child for the Before School Program and . . .**

* Signed up for Reminds by texting @dmsbefore to 81010

**Get a 10% discount if**

**attending both!**

* Included the Cycle 1 Payment of $125

**\_\_\_\_\_\_ I would like to register my child for the Afterschool Program and . . .**

* Signed up for Reminds by texting @dmsafter to 81010
* Included the one-time registration fee of $25 and the Cycle 1 Payment of $150

**Parent Waiver:** I do hereby release any and all personnel relating to Leon County Schools from any liability and/or damages as a result of participation in before school. I also waive all rights of entitlement concerning such loss.

**By signing below, you are acknowledging that you will adhere to the late pick up fees (afterschool program), the late cycle payment fees as listed on the proceeding pages, and the parent waiver.**

**Parent Signature(s):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Both parties responsible for fees must sign. One signature indicates 100% responsibility for payment.