

**Saint Rose of Lima School  
Kids' Haven for the 2022-2023  
School Year**

**MONDAY – FRIDAY 2:00 PM – 5:00 PM**

For the convenience of parents/guardians, St. Rose of Lima School is pleased to provide after school care, known as Kids' Haven.

The following is a list of Kids' Haven policies for the 2022-2023 school year:

- Kids' Haven is located in the gymnasium and begins at 2:00pm daily.
- A snack and beverage are provided (peanut/tree nut-free).
- Students are provided time to complete homework.
- There is outdoor play time, weather permitting (please provide appropriate outerwear).
- Parents will be charged for a minimum of 1/2 hour per day.
- Children must be students at St. Rose School to participate in this program.
- Kids' Haven is only available when school is in session.
- **The FIRST HOUR of Kids' Haven is free for Pre-K3 and Pre-K4. After the first hour, normal Kid's Haven rates will apply.**

**\*Any billing questions may be sent to Ms. Kara Buchanan ([kbuchanan@ssrci.com](mailto:kbuchanan@ssrci.com))**

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**St. Rose of Lima Kids' Haven Payment Schedule**

<b>TIME</b>	<b>1 CHILD</b>	<b>2 CHILDREN</b>	<b>3 CHILDREN</b>	<b>4 CHILDREN</b>
½ hour	\$3.50	\$6.00	\$9.00	\$11.00
1 hour	\$7.00	\$12.00	\$18.00	\$22.00
1 ½ hours	\$10.50	\$18.00	\$27.00	\$33.00
2 hours	\$14.00	\$24.00	\$36.00	\$44.00
2 ½ hours	\$17.50	\$30.00	\$45.00	\$55.00
3 hours	\$21.00	\$36.00	\$54.00	\$66.00

**Days/Hours Needed**

\_\_\_\_ Monday      \_\_\_\_ Tuesday      \_\_\_\_ Wednesday      \_\_\_\_ Thursday  
\_\_\_\_ Friday

**\*ALLERGIES, IF ANY**

Name of Child: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Child: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Child: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Child: \_\_\_\_\_ Grade: \_\_\_\_\_

For additional children, please check here \_\_\_\_ and list on the reverse side of this form.

**Parent(s)/Guardian(s):** The following individuals are authorized to pick-up student(s) from Kids' Haven at any time:

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Other Authorized Persons / Emergency Contacts:** The following individuals may be contacted in an emergency, in the event that a parent/guardian is not available. Such persons are also authorized to pick-up student(s) from Kids' Haven in the event that a parent/guardian is unable to pick up their child(ren):

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship to child(ren): \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship to child(ren): \_\_\_\_\_

### **PARENT AUTHORIZATION**

**Emergency Treatment** Should an emergency arise at Kids' Haven, it is understood that a conscientious effort will be made by the St. Rose of Lima staff member to contact me at the emergency numbers I have provided below before any medical action is taken.

I/We prefer to have our child taken to the following hospital: \_\_\_\_\_

Insurance Policy: \_\_\_\_\_ Policy #: \_\_\_\_\_

I/We understand that the choice of hospital may be limited by the service of local rescue services.

Kids' Haven is in receipt of any and all restraining orders pertaining to the above listed child(ren).

I/We hereby attest to the accuracy of all information provided on this form.

Signature of Mother/Guardian \_\_\_\_\_

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_

Signature of Father/Guardian \_\_\_\_\_

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_