

**Tiny Treasures Extended School Day Center
(Churchill & Stevenson Schools)**

P.O. Box 926

West Caldwell, New Jersey 07007

After School: 973 879-6155 ~ Main Office: 973 265-0085 ~ Fax: 973-265-0084

E-mail: TTextended@gmail.com

Dear Parents,

In these unprecedented times, Tiny Treasures Extended School Day is here to help. We would like to offer a program to supplement the Half Day Schedule and the Kindergarten Schedule. **At this time, childcare will only be available on the days your children are physically in school.**

Childcare will be offered each day at Churchill and Stevenson from 7:15 am until 8:45 am and again from **12:55 pm until 5:30**. We are closing aftercare at 5:30 to clean and sanitize our rooms to make sure all children and staff remain healthy. If you will be needing care for Kindergarten Half Days, there is more information available in this email. You may sign up for the schedule that best suits your needs.

PLEASE NOTE: THERE WILL BE NO DROP-IN CARE AVAILABLE

NJ Department of Children and Families Office of Licensing has given us the guidelines and protocols that we need to follow. It will be groups of 10 children to 1 designated staff member 10 feet apart. All staff will be required to wear a mask. Children are mandated to wear masks but can take them off if they need a break, socially distanced from other children. We are planning to separate by grade and/or teacher based on the number of children enrolled. Each group will have their own materials to work with and everything will be disinfected after use. We purchased disinfectant sprayers, wipes and other equipment necessary to keep the children healthy.

Tiny Treasures will be performing screenings prior to the morning admittance, so you will be required to walk your children in and answer a COVID-19 questionnaire.

If you have already sent in a registration fee form, please just fill out the new registration form and return it to us. All Registration forms must be in by Wednesday, August 19th.

If you would like additional information about the program, please call Fran Bunucci or Jennifer Zampino at 973-265-0085 or email us at TTextended@gmail.com.

Sincerely,

Francesca M. Bunucci

Francesca M. Bunucci

Executive Director

Jennifer L. Zampino

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AA/BB Pandemic Rates

BEFORE SCHOOL PROGRAM

(7:15 am to 8:45 am)

10 days per Month \$140

8 days per Month \$110

AFTER SCHOOL PROGRAM

(12:55 pm to 5:30 pm) 4 ½ hours

10 days per Month \$300.00

8 days per Month \$250.00

BEFORE & AFTER SCHOOL PROGRAM

(7:15 am to 8:45 am & 12:55 pm to 5:30 pm) 6 hours

10 days per Month \$420.00

8 days per Month \$360.00

NO DROP- IN CARE WILL BE AVAILABLE

DEPOSIT – One month's tuition – **NON-REFUNDABLE (yearly)** applied to June's tuition or can be rolled over.

REGISTRATION FEE - \$60.00 per family -

(Please do not combine Registration Fee and Deposit Fee in one check. Please send in separate checks.)

SIBLING DISCOUNT: - There will be a 10% discount off the second child.

**Tiny Treasures Extended School Day Center
(Stevenson School)**

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KINDERGARTEN Pandemic Rates

BEFORE SCHOOL PROGRAM

(7:15 am to 8:45 am) 1 ½ hours

<u>DAYS</u>	<u>MONTHLY AMOUNT</u>
5	\$165.00
4	\$155.00
3	\$140.00
2	\$110.00

HOURLY PROGRAMS

2 ½ HOUR PROGRAM

<u>DAYS</u>	<u>MONTHLY AMOUNT</u>
5	\$340.00
4	\$295.00
3	\$250.00
2	\$190.00

4 ½ HOUR PROGRAM

<u>DAYS</u>	<u>MONTHLY AMOUNT</u>
5	\$405.00
4	\$355.00
3	\$290.00
2	\$225.00

5 ½ HOUR PROGRAM

<u>DAYS</u>	<u>MONTHLY AMOUNT</u>
5	\$480.00
4	\$435.00
3	\$380.00
2	\$310.00

6 ½ HOUR PROGRAM

<u>DAYS</u>	<u>MONTHLY AMOUNT</u>
5	\$525.00
4	\$475.00
3	\$430.00
2	\$335.00

8 HOUR PROGRAM

<u>DAYS</u>	<u>MONTHLY AMOUNT</u>
5	\$560.00
4	\$510.00
3	\$465.00
2	\$370.00

NO DROP- IN CARE WILL BE AVAILABLE

DEPOSIT – One month's tuition – **NON-REFUNDABLE** (yearly) applied to June's tuition or can be rolled over.

REGISTRATION FEE - \$60.00 per family

(Please do not combine Registration Fee and Deposit Fee in one check. Please send in separate checks.)

SIBLING DISCOUNT: - There will be a 10% discount off the total tuition.

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2020 - 2021 REGISTRATION FORM

(Please print neatly and legibly)

CHILD'S NAME: _____ SEX: _____ AGE: _____

BIRTHDAY: _____ GRADE: _____ (as of 9/2020) SOCIAL SECURITY #: _____

ADDRESS: _____

HOME PHONE: _____

ALLERGIES/FOOD RESTRICTIONS: _____

GUARDIAN (1) NAME: _____

RELATIONSHIP TO CHILD: _____ GUARDIAN (1) E-MAIL ADDRESS: _____

CELL PHONE: _____ WORK PHONE: _____

GUARDIAN (2) NAME: _____

RELATIONSHIP TO CHILD: _____ GUARDIAN (2) E-MAIL ADDRESS: _____

CELL PHONE: _____ WORK PHONE: _____

PROGRAM SELECTION:

BEFORE SCHOOL (AA/BB) AFTER SCHOOL (AA/BB) BEFORE & AFTER SCHOOL (AA/BB)

KINDERGARTEN: [BEFORE SCHOOL 1 ½ hours](#) [2 ½ HOUR PROGRAM](#)

[4 ½ HOUR PROGRAM](#) [5 ½ HOUR PROGRAM](#) [6 ½ HOUR PROGRAM](#) [8 HOUR PROGRAM](#)

NUMBER OF DAYS: 5 4 3 2

CHOICE OF DAYS: MONDAY-FRIDAY

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

(Kindergarten Only)