



Greater Gallatin  
United Way



## Welcome to kidsLINK Tigers After School!

Manhattan Public Schools (MPS) and Greater Gallatin United Way kidsLINK (GGUW) have partnered to offer Tigers After School kidsLINK. Our after school program is here to keep students safe and engaged in fun filled activities while allowing families to complete their workday. It also gives families flexibility to run to the doctor or dentist in the afternoon without worrying about what to do with their school age kids. Register now to attend!

- ★ This program is available to all students enrolled in grades K-4+ here at MPS.
- ★ We follow the same school policies and procedures outlined in the school handbook, with some modification, as this will be after school hours. There will be no school nurse available after school for medications. We will have access to the nurses cabinet in an emergency, but only in an emergency.
- ★ We will be in the elementary school and use the elementary school playground. Outside elementary door #14 will be the main pick up location. Please call 595-6644 when you are on-site and walking towards the meet up location. We will meet you outside with your child. *Covid restrictions do not allow parents to enter the building so we ask that you please wait outside and we will come meet you.*
- ★ We will not be open on: Pre-scheduled early release days, PIR, school holidays, or other school closures.

### **Sample schedule:**

- 3:15 (2:45 Friday) - Meet students and take roll in the hallway by the K-2 lost and found.
- Friday 12:55 - 2:45 - Students will be taken into the gym or outside for most of this time.*
- 3:25 - 3:45 - Have a healthy parent provided snack and go over school work.
- 3:45 - 4:30 - Go outside or access gym space to run off some energy.
- 4:30 - 5:00 - Begin daily rotation of arts and crafts, physical and mental activities.
- 5:00 - 5:25 - (Fridays additional time spent here) Additional tutoring, reading time, etc...
- 5:25 - Clean up
- 5:30 - Final pick up - **Call 595-6644 and meet outside.**

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**Checks Payable to:** "Manhattan School District" **MEMO:** "kidsLINK Tigers After School"  
**Mail payment** to Manhattan Schools PO BOX 425 Manhattan, MT 59741  
**Leave payment** with Mrs. Howells at the Elementary Front Desk or with an After School Program Assistant  
**Online Payment** using your School Infinite Campus Account



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## Contact:

1. Email, please try to use email correspondence as much as possible.
2. Daytime questions call: **284-6460** ext 231. After school call or text: **406-595-6644**
3. **Only for emergency** should you contact: Mrs. Kallestad's personal cell 406-799-9463.

## Pricing & Reservations:

**One Time Registration:** \$15 single child or \$25 family registration fee.

**Level 1:** Monthly payment and full month schedule due at the beginning of the month prior: \$8 per day for single child or \$6 per day for siblings. Example: January's schedule will be due at the end of November and payment will be due the first week of December.

**Scholarships:** Are based on available funding from GGUW. Please see the Registration Packet and fill in the appropriate information to apply for assistance. Income verification must also be provided at the time of application.

**Teachers & Staff:** Contact us for rate information.

**Level 2:** Bi-weekly payment and schedule spots: \$10 per day. This rate also applies for reservations made less than 1 month in advance, but still 14 business days prior to the date needed (no siblings, scholarship or staff discount).

**Level 3:** Short notice care is not guaranteed, but we will do our best. If a spot is available, the rate would be \$15 per day. This rate applies to any reservations made 13 business days or less from the date needed (no siblings, scholarship or staff discount).

### ★ **All schedule requests, changes, or absences must be communicated via email.**

Messages communicated in person, phone, or via text may not be tracked accurately and therefore will not be considered valid. Please use email as the main communication method for scheduling.

★ **Late pick up:** A one time grace period will be allowed to account for unexpected traffic or a train. A \$1 per minute late fee will be assessed after the one time grace period.

★ **Sick days or short notice:** Payments and reservations are there to hold that spot for your student. Staffing was also arranged per your schedule so we are not able to offer a refund/move days on short notice like this. All schedule changes or absences must be communicated via email.

★ **Vacation notice:** With two weeks notice, we can issue you a credit for the following month's reservations. *All credits must be used prior to the end of the school year.* All schedule changes or absences must be communicated via email.



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Print Name of Student: \_\_\_\_\_

Print Name of  
Parents/Guardians: \_\_\_\_\_

Signature of Parent/Guardian (You are acknowledging & accepting the aforementioned policies, procedures and fee schedule):

\_\_\_\_\_ Date: \_\_\_\_\_

\*Allergies and list of current medications (vitamins, epi pen, inhalers, etc...):

\_\_\_\_\_  
\_\_\_\_\_

## EMERGENCY CONTACT INFORMATION:

Name & Phone Number (These contacts will also be allowed to pick up your student):

1. (Yourself)

\_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

## NEXT STEPS TO ENROLL AND SCHEDULE:

1. Sign & return this page along with the registration packet (keep policy pages for reference).
2. Once all the paperwork is received, you will be emailed a Google Form to schedule the dates you need care.
3. Once the Google Form is received you will be emailed an invoice for the dates of care.  
\*\*\*Invoiced rates are based on the date the schedule AND all paperwork is received.
4. Payment is due PRIOR TO attendance.



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# kidsLINK Tigers After School Registration Form:

## **BILLING & CONTACT INFORMATION:**

Your name and relationship to student: \_\_\_\_\_

Email: \_\_\_\_\_

Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Physical address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Adult 2 name and relationship to student: \_\_\_\_\_

Email: \_\_\_\_\_

Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

**MARITAL STATUS:**    Not married    Married    Separated    Divorced    Widowed

*If separated or divorced, who is the custodial parent and explain custody schedule:*

\_\_\_\_\_

**HOUSEHOLD INFO:**   Number of persons living in the home: \_\_\_\_\_

Annual net income for household (includes all working adults): \_\_\_\_\_

*Our grant funding is based on household income levels and what percentage of low income families we are able to help. The information you provide is very helpful in helping us get more grant funding for this program.*

Employer and job title. If Self-employed, list occupation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**STUDENT INFO:** Name: \_\_\_\_\_ Gender: Male   Female

Birthdate: \_\_\_\_\_ Current Grade and Teacher: \_\_\_\_\_

Pediatrician & Clinic Name: \_\_\_\_\_

Does the student have an IEP: Yes No Unsure      Does the student have CSCT: Yes No Unsure

Does your child have needs or sensitivities that would be helpful for our child to know:

What are the best ways your child responds to redirection or how can we request behavior change?

**STUDENTS RACE/ETHNICITY:**  White    Hispanic/Latino/Spanish    American Indian/Alaska Native  
 Black/African American    Native Hawaiian/Pacific Islander    Asian    Other: \_\_\_\_\_  
Language spoken (if not English): \_\_\_\_\_

**SCHOLARSHIP INFORMATION:** Scholarships are available on a sliding scale based on income, family size, need and available grant funding. Families requesting assistance will have their income verification reviewed throughout the year. \*\*\*Registration fees are not covered by the scholarship.

Do you wish to apply for scholarship assistance? Yes *If yes, please attach your last filed tax returns.* No      I  
am applying for:  50% scholarship (\$4/afternoon)    75% scholarship (\$2/afternoon)    100% scholarship

Do you qualify for Free/Reduced Lunch? Yes No

**VOLUNTEER OPPORTUNITIES:** Would you like to be involved and volunteer in the program? Yes No  
If yes, please check options below:

- Come in and assist one afternoon       Enrichment activities such as coming in to speak about your job
- Plan a fundraiser for the program       Other ideas: \_\_\_\_\_

**PHOTO RELEASE:** Pictures may be taken during the program for the purpose of adding to the yearbook, publicity or marketing. Photos may be displayed in print or on GGUW website. GGUW will never include students' names when posting. By "agreeing", I hereby grant permission to Manhattan Elementary and/or GGUW to use the picture, photograph, silhouette and other reproductions for public distribution for advertising, promotion and exhibition in print or electronic means.       I agree       I don't agree

\*\*\*\*\*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Students can not attend the kidsLINK Tigers After School program until paperwork, schedule and payment are all received.*