



# ODYSSEY PREPARATORY ACADEMY

1350 Wyoming Dr. SE ♦ Palm Bay, FL 32909

Phone (321) 372-7263 ♦ Fax (321) 327-7261

Enrichment Director: Alia Hartwick ♦ [HartwickA@odysseycharterschool.com](mailto:HartwickA@odysseycharterschool.com) ♦ 321-733-0442 ext. 214



## Extended Care Registration

*Extended Care is a service to families with bus riding elementary students at OPA and bus riding siblings in the Jr./Sr. High. The OPA students can attend the aftercare program until the Jr./Sr. High is dismissed. This will allow elementary students to ride the bus home together with their older siblings.*

**Extended Care Hours:** Regular school days are **2:45-4:15**.  
Friday Early Release Days are **1:25-4:15**.

**Weekly Tuition:** **\$50.00** per week – Payable to OPA

### Tuition Policy and Fees Information:

- ♦ A one-time \$50 registration fee is due upon enrollment.
- ♦ Tuition is to be paid ahead of the week and is due on Mondays. Any accounts that aren't paid by Wednesday of each week will be given notice of suspension from Enrichment until payment is made in full. You may pay ahead for as many weeks as you would like.
- ♦ Payments can be paid through Procure, via credit card, or automatic withdraw (form required) or by check or money order (payable to **OPA Enrichment**). *Cash is not an acceptable form of payment.*
- ♦ Tuition is based on program selected on this registration form, not by attendance. **Tuition is non-refundable for any reason.**
- ♦ Siblings who are enrolled in the same program will receive a 10% discount on tuition.
- ♦ A late pick-up fee will be assessed at \$1.00 per minute starting at 6:31pm.
- ♦ A late payment fee of \$10.00 will be assessed for each week on any tuition that is not received before Tuesday.
- ♦ A fee of \$25.00 will be assessed to accounts for any returned checks.

### **Program Withdrawals Policy:**

- ♦ Any changes to your child's schedule must be made in writing, and given to the Director ([HartwickA@odysseycharterschool.com](mailto:HartwickA@odysseycharterschool.com)) one week prior to schedule adjustment.
- ♦ If you plan to withdraw your child from the enrichment program, you must notify the Director ([HartwickA@odysseycharterschool.com](mailto:HartwickA@odysseycharterschool.com)) in writing one week prior to withdraw.

## Discipline Procedures and Policies for Enrichment, Extracurricular and Summer Programs:

Odyssey Preparatory Academy's enrichment staff is committed to providing a safe, positive, and structured environment for all children in the program. Although the enrichment program operates outside of the regular school day, appropriate student behavior is still expected. Please know that all rules will be reviewed with students at the beginning of the program and daily as needed. It is imperative that both students and parents understand the expectations of the enrichment program. **Any student, who chronically receives referrals for discipline issues during the school day, will not be admitted to the Enrichment, Extracurricular or Summer Programs offered by Odyssey Schools.**

### Procedures:

- ◆ Show respect at all times.
- ◆ Move appropriately throughout the campus and in outdoor play areas.
- ◆ Follow instructions set forth by enrichment teachers.
- ◆ Refrain from damaging any school property.
- ◆ Refrain from disruptive behavior, fighting, violence of any kind, and inappropriate language.
- ◆ Comply with any and all regulations set forth by Odyssey Preparatory Academy's enrichment staff and school administrators.

### Consequences:

- ◆ Students will receive one verbal warning each day if necessary.
- ◆ **First Offense:** An incident report will be sent home with the parent or guardian. A copy signed by the parent will remain in the student's enrichment file.
- ◆ **Second Offense:** A second incident report will be sent home with the parent or guardian. A copy signed by the parent will remain in the student's enrichment file. The student will lose computer privileges and the student will meet with the enrichment director to discuss his/her behavior.
- ◆ **Third Offense:** A third incident report will be sent home with the parent or guardian. A copy signed by the parent will remain in the student's enrichment file. The student and parent will meet with the enrichment director to discuss his/her child's behavior and the student will be suspended from the program for up to 5 days.
- ◆ **Fourth Offense:** The student will be permanently suspended from Odyssey Preparatory Academy's Enrichment, Extracurricular or Summer Programs.

*Please be advised: Administration reserves the right to suspend or remove a student from the Enrichment, Extracurricular or Summer Programs if any incident is deemed severe enough without prior referrals.*



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## Extended Care Registration

**Please Circle and Days of Attendance**

Days of Attendance: Monday Tuesday Wednesday Thursday Friday

**OFFICE USE ONLY** Weekly tuition \_\_\_\_\_ Registration Fee \_\_\_\_\_ Amount Paid \_\_\_\_\_ Check # \_\_\_\_\_ Procure \_\_\_\_\_

**Student(s) Information:**

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

1. Name \_\_\_\_\_ Grade \_\_\_\_\_  
*Last First Middle Initial "Nickname" if used*

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Special Needs:  None  Other \_\_\_\_\_

2. Name \_\_\_\_\_ Grade \_\_\_\_\_  
*Last First Middle Initial "Nickname" if used*

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Special Needs:  None  Other \_\_\_\_\_

3. Name \_\_\_\_\_ Grade \_\_\_\_\_  
*Last First Middle Initial "Nickname" if used*

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Special Needs:  None  Other \_\_\_\_\_

Address \_\_\_\_\_  
*Street City State Zip Code*

**Parent or Guardian Contact Information:**

Primary Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address (if different than student) \_\_\_\_\_  
*Street City State Zip Code*

Work ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Cell ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Home ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

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

Secondary Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address (if different than student) \_\_\_\_\_  
*Street City State Zip Code*

Work ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Cell ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Home ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

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

**Consents/Acknowledgements:**

I give consent for my child to watch PG movies  Yes  No

I give consent for my child's photo to be used within the school and on MVG's Facebook page  Yes  No

I have received a copy of the Know Your Childcare Facility Brochure.  Yes  No

I have received a copy of the Distracted Adult Brochure. (Every April & September)  Yes  No

I have received a copy of the Influenza Virus Brochure.  Yes  No

**Health and Emergency Information:**

Child \_\_\_\_\_ Condition/Allergy \_\_\_\_\_ Reaction \_\_\_\_\_ Accommodation/Treatment \_\_\_\_\_

Child \_\_\_\_\_ Condition/Allergy \_\_\_\_\_ Reaction \_\_\_\_\_ Accommodation/Treatment \_\_\_\_\_

Child \_\_\_\_\_ Condition/Allergy \_\_\_\_\_ Reaction \_\_\_\_\_ Accommodation/Treatment \_\_\_\_\_

Physician Name \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

\*\*\* Is emergency medical treatment authorized if necessary?  Yes  No \*\*\*

**Alternate Pick-Up Authorization Policy:**

Odyssey Preparatory Academy does NOT release a student to anyone other than the parents/guardians, or those persons authorized on this form. This authorizes persons, other than yourself, to take your child out of our school facility. If a student is to be picked up by one of the authorized persons listed below, please contact the school ahead of time. For the protection of your child, a student **WILL NOT BE RELEASED** to anyone that is **NOT LISTED** below unless prior notice is received in writing from the parent or guardian of any changes to the authorization list. Please notify every authorized pick-up person on this list that a photo ID is **REQUIRED** at the time of pick-up in order for our staff to release your child to their custody.

Authorized Sibling (attends upper campus) \_\_\_\_\_  
Printed Name

Grade \_\_\_\_\_ Bus Route # \_\_\_\_\_ Cell ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Additional Authorized Sibling (attends upper campus) \_\_\_\_\_  
Printed Name

Grade \_\_\_\_\_ Bus Route # \_\_\_\_\_ Cell ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

1. Authorized Person \_\_\_\_\_  
Printed Name Relationship  
 Cell ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Home ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Work ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
 Is this person also an Emergency Contact Person?  Yes  No

2. Authorized Person \_\_\_\_\_  
Printed Name Relationship  
 Cell ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Home ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Work ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
 Is this person also an Emergency Contact Person?  Yes  No

3. Authorized Person \_\_\_\_\_  
Printed Name Relationship  
 Cell ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Home ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Work ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
 Is this person also an Emergency Contact Person?  Yes  No

4. Authorized Person \_\_\_\_\_  
Printed Name Relationship  
 Cell ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Home ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Work ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
 Is this person also an Emergency Contact Person?  Yes  No

I, \_\_\_\_\_, have read and agree to the Enrichment Program's  
Printed name of parent or guardian

Tuition Policy and Fees  Discipline Procedures and Policies  Alternate Pick-Up Authorizations  
initial initial initial

\_\_\_\_\_  
Signature of parent or guardian \_\_\_\_\_  
Date



# Automated Payment Processing

Safe. Convenient. Easy.

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

## ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT AND CREDIT CARD

I (we) hereby authorize Odyssey Preparatory Academy's Enrichment Program to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments. Check with the center for accepted credit card types.

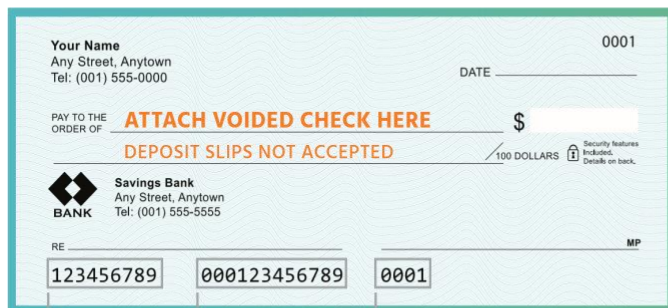
### COMPLETE ONE SECTION ONLY

#### SECTION A (Credit Card)

|                      |  |                 |           |
|----------------------|--|-----------------|-----------|
| _____                |  | _____           |           |
| Cardholder Name      |  | Phone #         |           |
| _____                |  | _____           | _____     |
| Cardholder Address   |  | City            | State Zip |
| _____                |  | _____           |           |
| Account Number       |  | Expiration Date |           |
| _____                |  | _____           |           |
| Cardholder Signature |  | Date            |           |

#### SECTION B (Bank Account)

|   |                                   |                                   |                                  |
|---|-----------------------------------|-----------------------------------|----------------------------------|
| _____                                     |                                   | _____                             |                                  |
| Your Name                                 |                                   | Phone #                           |                                  |
| _____                                     |                                   | _____                             | _____                            |
| Address                                   |                                   | City                              | State Zip                        |
| _____                                     |                                   | _____                             |                                  |
| Bank or Credit Union Name                 | Bank or Credit Union Address      | City                              | State Zip                        |
| _____                                     | _____                             | _____                             | _____                            |
| Routing Transit Number (see sample below) | Account Number (see sample below) | <input type="checkbox"/> Checking | <input type="checkbox"/> Savings |
| _____                                     |                                   | _____                             |                                  |
| Authorized Signature                      |                                   | Date                              |                                  |



|                |                |              |
|----------------|----------------|--------------|
| ROUTING NUMBER | ACCOUNT NUMBER | CHECK NUMBER |
|----------------|----------------|--------------|

**FOR OFFICIAL USE ONLY**

|                    |
|--------------------|
| _____              |
| Date Received      |
| _____              |
| Employee Signature |

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Dear Families,

We know how important it is to stay up to date on your child's learning journey, which is why we're excited to offer you access to Procure Solutions' best-in-class parent app.

### What Can I See on the App?

The app offers several "contactless" ways to check your child in and out. This helps us limit in-person interactions and unnecessary foot traffic in the school so we can better ensure the health and wellbeing of you, your children and our staff. Payments may be made through Tuition Express within the Procure App. Acceptable forms of payment are bank withdraw, or credit card. We do offer automatic withdrawal as well (please fill out the attached form). If you choose to pay by check or money order, it will be processed through Procure within two days.

Your child's authorized pickup persons along with their unique pin numbers will also be listed in the app for viewing. New this year, you may add authorized pickup persons on your account at any time. Please notify us if you would like to remove someone from your account.

### How do I get the App?

You will receive an email from Procure with a unique 10-digit code and instructions on how to download and log into the app. Please **make sure your email is listed on the registration paperwork**. Please see additional information for checking your child in and out, when dropping off or picking up from Enrichment.

Sincerely,

Alia Hartwick  
*Enrichment Director*  
321-733-0442 ext. 214

