



MOREAU COMMUNITY CENTER
making community connections

May 18, 2018

We will be providing Kids Korner services on the 2 half days in June (15th, 21st) Tanglewood and Moreau will go to Harrison. Ballard will stay at Ballard. Please note that if your child goes to Moreau or Tanglewood, you need to sign the permission slip for transportation and return it to the Community Center.

Please keep in mind that you will need to provide a lunch for your child on that day; we will provide an afternoon snack. The cost for this program will be regular Kids Korner afternoon fee plus \$10 and \$5 for siblings a day.

To sign up for this program please call Jennifer at the Community Center at 792-6007 ext. 17 or you can email me at jabare@moreaucommunitycenter.org. Please give your child's name and your name. Please note if you do not sign up, you are not automatically enrolled in the program.

Sign up for this program must be done by Friday June 8th.

Thank you in advance for getting back to me quickly.

Sincerely,

Jennifer Rich
Youth Director

C: Donna C. Nichols
C: Darcy Johnson

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
TRANSPORTATION CONSENT FORM
Child Day Care Programs

Provider Name: Moreau Community Center

Facility ID Number: 0007141791/92/90/93

Program Name: Kids Korner

This form may be used to meet the regulatory requirement to obtain written consent from the parent of a child for any transportation provided or arranged for by a caregiver, and to inform the parent when the person who is providing transportation changes. This form is not the Transportation Plan.

Parents whose children receive transportation services must receive, at the time of enrollment of their children, a copy of the program's transportation plan. If the plan is amended, parents must receive a copy of the amended plan prior to its start date.

It is recommended that a separate Transportation Consent Form be completed for each child.

I have been informed of, and agree to, the transportation plan of the above child care program.

Transportation Plan is attached to this Transportation Consent Form (Yes / No) *circle one*

Date of Transportation Plan June 15th and June 21st

I give permission for my child
(name)

to be transported by (caregiver
names and/or transportation
contractor arranged for by the
program) South Glens Falls Central School District Transportation

At the following times (check all that apply):

Only as recorded on the posted transportation schedule for my child

Other (explain) **During Half Day Programs the Moreau Elementary and Tanglewood Elementary children will be bussed to Harrison Avenue. Parents will pick up their children at Harrison Ave. Elementary no later than 6pm. Ballard children will stay at Ballard Elementary. OWMS children will be bussed to Harrison, where their parents will pick them up; unless their home elementary school was Ballard. Then they will be bussed to Ballard and their parents will pick them up at Ballard.**

By signing this form I am giving consent for the above described transportation services.

Parent Printed Name: _____

Parent Signature: **X** _____

Date _____