Homework Club 2019-20
Scottsdale Preparatory Academy (grades 6-12)

Homework Club is a place for your student to complete homework, receive peer tutoring, and quietly socialize with friends in a supervised environment. The program runs every school day (including half days) after school until 5:30PM.

Registration Fee
$25 non-refundable

Pre-Pay for the entire year and receive a discounted rate!
$800 for first child
$700 for each additional child

Monthly Cost:
$100 per month for first child
$70 per month for each additional child

Additional Options:
$300 one-time fee for care on the 22 half days
$100 for each child per season for athletes and siblings of athletes

Additional Fees:
$10 late pick-up fees will be charged beginning at 5:31 (see details on following page)

For more information, contact:
Mr. Thomas Underdal
tunderdal@ScottsdalePrep.org

READY TO ENROLL?
1. Go to Scottsdale Prep Payment Portal on the SPA website and pay registration fee
2. Complete the attached registration form and return:

EMAIL
Scan and email to Mr. Underdal at tunderdal@ScottsdalePrep.org

MAIL
Homework Club
Scottsdale Preparatory Academy
16537 N. 92nd Street, Scottsdale, AZ 85260

Drop Off
Scottsdale Preparatory Academy’s Front Office
Summer Hours: 8am-1pm
OR
Turn in at front office during Back to School Night (Aug. 5th)
HOW THE PROGRAM WORKS
• Homework Club is open to students grades 6–12. It operates every school day (including half-days) from after school until 5:30PM.
• Upon dismissal at the end of the day, students will gather their belongings, have time for a snack, and proceed to the Multiple Purpose room, where they will sign in to Homework Club at 3:30.
• From 4:00-5:00 students will be brought into the Multiple Purpose room for quiet homework time. If students do not have homework, they can do any quiet activity.
• If students have a club or need to attend tutoring with a teacher directly after school (prior to the start of Homework Club), they may sign in to Homework Club once they are finished.
• If students have tutoring, a club, sports, or other school obligations during the hours of Homework Club, they may sign out to attend to them, and then return to Homework Club.
• Parents do not need to communicate to us which days their children will attend; parents are responsible for instructing their children which days they should attend Homework Club, and which days they will be picked up.
• We do not assume responsibility for registered students unless and until they actually sign in to Homework Club. Once they sign in, we will be responsible for them until parents pick them up and sign them out, or until they are dismissed for athletic practice.

WHAT HOMEWORK CLUB IS...AND IS NOT
Homework Club is a safe, structured environment in which students may quietly work on homework until their parents arrive to pick them up or until they are dismissed for athletic practice. While we allow for quiet peer tutoring, it should be noted that Homework Club is not a “tutoring service.” Homework Club monitors will be happy to answer the occasional question, but they will not be able to work individually with students for extended periods. Students who require individual tutoring should make arrangements with their teachers, or they may take advantage of the peer tutoring option.

Homework Club monitors assume that students will work independently on their homework, and that, once their homework is finished, they will read, work ahead, play some of the quiet games we provide, etc. Monitors will not be checking to see that each student has finished his/her homework; completing homework is each student’s responsibility.

PAYMENT POLICIES
For All Families
• You will pay the non-refundable registration fee of $25 online to begin the enrollment process.
• Your first payment will be for a full month’s cost, regardless of when you join, and will not be prorated.
• Monthly fee is paid through a recurring, automatic charge to your credit card on the 28th of the prior month.
• A $10.00 late fee will be charged for late pickups (after 5:30). An additional $10.00 will be charged at 5:41, 5:51, and so forth. Late pick up fees will be charged to your credit card on file.
• You may withdraw from the program with no penalty if you notify Mr. Underdal in writing by the 25th of the month prior to the month you desire to withdraw.
• Non-attendance is NOT a form of withdrawal.
• Please note that no refunds will be granted for withdrawals requested after the 25th of any month for the following month.
• Please note that partially-used months will not be prorated and that the discounted pre-pay rate can not be partially refunded.

For Athletes & Siblings
• For each athletic season, it is your responsibility to notify Mr. Underdal by email that your child is signed up to play a sport, prior to the start of the season. The $100 per season fee will be charge at the beginning of the season.
Homework Club (2019-20)  
BILLING & REGISTRATION FORM  

PLEASE NOTE: You must turn in completed registration paperwork to the front office and pay the registration fee online before we begin to process the enrollment. Please WAIT FOR CONFIRMATION e-mail from Mr. Underdal before sending your child. Confirmation that you may begin utilizing the program will come in the form of a “Welcome Email” from the Mr. Underdal (For detailed pricing information and payment policies, see previous page.)  

FAMILY & STUDENT INFORMATION:  
PLEASE PRINT LEGIBLY  

PARENT Name(s): ____________________________________________  

Student First and Last Name: ________________________________  M  F  Grade in Fall 2019:_______  

PLEASE INITIAL APPROPRIATE BILLING  

_____ I want to take advantage of the discounted pre-pay offer ($800 one-time fee for the entire year, $700 for siblings)  

_____ Please charge my credit card, on or around the 28th, the monthly fee ($100 for first child and $70 for additional children)  

_____ This student will ONLY use Homework Club during his/her competitive sport season, or during a sibling’s competitive sport season. ($100 per season)  

_____ This student will ONLY use Homework Club on half days ($300 one-time fee for the entire year)  

*Please print a second copy of this page for additional children  

BILLING INFORMATION:  

NOTE: All fields are required. Incomplete forms will not be processed.  

Parent First Name: ___________________________ Parent Last Name: ____________________________________________  

MAKE ALL PAYMENTS ON-LINE THROUGH CONFIGIO  
You can find the link for Configio on the Scottsdale Prep. website: Scottsdale Prep. Payment Portal  

[ ] I have read and understood the Payment Policies (See Previous Page).  

Signature: _____________________________ Date: ____________________________
Scottsdale Prep Homework Club (2019-20)
GENERAL Information, MEDICAL Information,
EMERGENCY CONTACT, and PERMISSION FORM
(Please print clearly and use a separate form for each child.)

Child Name:______________________________________________________ □ Male □ Female
Address:__________________________________________________________________________________________
City:________________________________________ State:__________ Zip:____________________
Birthdate/Year:__________________________ Age on August 1, 2019:_______ Grade in Fall 2019:_______

Parent/Guardian 1: ____________________________________________________________________________ □ Male □ Female
Email:___________________________________________________________________________________________
Cell #:______________________________________ Home #:___________________________________________
Employer:________________________________________ Business #:____________________________

Parent/Guardian 2: ____________________________________________________________________________ □ Male □ Female
Email:___________________________________________________________________________________________
Cell #:______________________________________ Home #:___________________________________________
Employer:________________________________________ Business #:____________________________

□ In addition to Parent/Guardian names listed above, these person(s) have permission to pick up my child from Homework Club. I understand that my child will not be allowed to leave with any other person without authorization from me:

Name:________________________________________ Phone #:______________ Relation:__________________

Name:________________________________________ Phone #:______________ Relation:__________________

□ The following individual(s) may NOT remove my child from the facility:

Name:________________________________________ Phone #:______________ Relation:__________________
(Child Name: ____________________________ )

Health History (Use additional paper if more explanation is necessary)

□ Asthma □ Bleeding/clotting disorders □ Convulsions □ Ear infections
□ Other ___________________________________________________________________________________________

Allergies: □ Pollen □ Penicillin □ Insect stings (type?) ________________________________
□ Food (list) _________________________________________________________________________________
□ Other allergies (describe) ______________________________________________________________________

Recent operations, serious injuries, diseases, or restrictions on physical activity:
________________________________________________________________________________________________

Current medication and purpose (all medication must be given to Homework Club Director and labeled clearly with doctor’s instructions):
________________________________________________________________________________________________

Learning differences, behavioral conditions, or problems of which staff should be aware (please note that Special Education Services are NOT available at Homework Club):
________________________________________________________________________________________________

Parent Authorization/Medical Release: The information provided is correct to the best of my knowledge. The child listed on this form has my permission to engage in all Homework Club activities, except if noted by me.

I (we), the undersigned, understand that Homework Club staff will first contact me directly after contacting emergency services in case of a life-threatening emergency. I (we) authorize Homework Club staff members (in the event they cannot reach me [us]) to serve as agent(s) for the undersigned to consent to any medical or surgical diagnosis or treatment, anesthetic, X-ray exam, along with treatment and/or hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician or surgeon licensed under the provisions of the Medical Practice Act on the medical staff of any accredited hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. I (we) understand that I (we) will be responsible for expenses for such services.

I (we) understand that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required, but is given to provide authority and power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment, or hospital care which the aforementioned physician in the exercise of his/her best judgment may deem advisable. This form may be photocopied for use away from the main program site.

My child has medical insurance. □ Yes □ No
Name of insurance company: ________________________________________________________________
Policy number: _______________________________________________________________________

PARENT/GUARDIAN SIGNATURE: ______________________________________________________________
DATE: ________________________________________________________________________________
Scottsdale Prep Homework Club (2019-20)
“Quick Pick-Up” Registration & Authorization
(Optional)

Don’t want to come in to sign out your child? Use the “Quick Pick-Up” option! Simply come in the first day you use Homework Club and sign your child out, and bring us this form to us in person. At that time, you may give us up to three cell phone numbers that we will program into the contact list of our on-site phone. After that, simply call or text your child’s name to us, and we will send him/her out. Note that we will NOT release the student to callers/texts from an unknown number.

Please note: You MUST come in at least once and bring us this form in person. We will not honor the form if you scan it to us with your registration; please instead drop it off with our staff on the first day you use Homework Club.

Please note the on-site number you should text or call for quick pick-up: 602-740-6534

Full names of child(ren) who may be picked up using “Quick Pick-Up” (Note: We will NOT release your child(ren) unless s/he is/are listed here):

Student Names: ____________________________________________________________

Phone Number(s) Authorized for Quick Pick-Up:

(1) Phone Number: ________________________________________________________
   Phone Owner: ___________________________________________________________
   Relationship to child: ___________________________________________________

(2) Phone Number: ________________________________________________________
   Phone Owner: ___________________________________________________________
   Relationship to child: ___________________________________________________

(3) Phone Number: ________________________________________________________
   Phone Owner: ___________________________________________________________
   Relationship to child: ___________________________________________________

I hereby authorize Scottsdale Prep Homework Club to release my child(ren) upon receiving a text or a phone call from the numbers listed above, in lieu of my physically signing them out from Homework Club. I will not hold Homework Club responsible for my child’s welfare after Homework Club releases him/her in response to a call or text from the numbers listed on this form. I understand that Homework Club will not release my child to a text or call from an unregistered number, and that they may change this policy and require me to physically sign out my child(ren) at any time.

Parent Name (printed): ____________________________________________________

Signature: ___________________________________________ Date: ______________