



Harford Heights Child Care Program at:

**GARRISON FOREST SCHOOL**

300 Garrison Forest Rd, Owings Mills, MD 21117

Telephone: 410-363-0083: (during program hours)

Harford Heights Child Care, Inc. Est. 1984; Fed. I.D. #20-4047614

Mailing Address: 1 William Court, Sparks, MD. 21152, FAX: 410-329-5866

LENORE RUDICK, Adm. Director: E-MAIL: [lenoreruth@yahoo.com](mailto:lenoreruth@yahoo.com), Cell 410-375-4557;

MICHELE BERMAN, Director: E-Mail: [Micheleberman8@gmail.com](mailto:Micheleberman8@gmail.com), Cell 443-996-8418

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### SCHOOL YEAR 2020-2021

Dear Parents,

**Welcome** to the **2020-2021** Harford Heights After School Program at Garrison Forest School. Now entering our 31st year of operation in the Maryland area, we are proud to be embarking on our 14<sup>th</sup> year serving our Garrison Forest families.

Licensed by the State of Maryland, Harford Heights After School is dedicated to building children's self - esteem by providing a quality learning community with activities designed to meet the developmental needs and interests of student's Pre-K through 5<sup>th</sup> grade. Our Mission is to provide a positive, experience in a happy, healthy environment so Garrison Forest parents may have peace of mind while they continue to seek their professional and economic goals.

Our experienced staff enjoys interacting with children, providing a supervised environment that is a healthy mix of physical activity, mental stimulation, and social interaction. The children will use the Lower School art, science and library rooms.

The following programs will be available for the **2020-2021** school year:

**I. After-School Program.** (1, 2, 3, 4, or 5 days per week)

Begins at school dismissal time. As the children enter the art room, attendance is verified to ensure all program participants are present. After a nutritious afternoon snack, children go outside for exercise and fun, taking advantage of good weather. Each day children will also be able to select from different activities such as arts and crafts, table games, sports, and socializing with friends. In addition, we will offer time for your child to work on their homework under staff supervision. **You may use your Master Card, Visa Card or American Express Card for registration and tuition fees.**

| Number of Afternoons Per Week | Full Session:<br>3:30 - 6:00 pm<br>Annual Tuition | Early Session:<br>3:30 - 5:00 pm<br>Annual Tuition | Payment Schedule:  |
|-------------------------------|---|--|--|
| 5                             | \$3,454.00  | \$2,931.00   | <ul style="list-style-type: none"> <li>• <b>In full:</b> by <b>October 30, or</b><br/><b>Two equal payments:</b><br/><b>#1: <u>October 30</u>; #2: <u>January 30</u></b></li> <li>• Tuition is pro-rated for those starting later in the year</li> <li>• <b>Tuition and registration fees are non-refundable.</b></li> </ul> |
| 4                             | \$3,369.00  | \$2,722.00   |  |
| 3                             | \$2,792.00  | \$2,384.00   |  |
| 2                             | \$2,131.00  | \$1,833.00   |  |
| 1                             | \$1,219.00  | \$1,030.00   |  |

**II. Emergency Drop-In Hourly Care.** Children must be pre-registered with Harford Heights to utilize the Drop-In program. Due to new mandated guidelines in response to Covid-19, **you must call in 24 hours in advance to use the drop- in service** as space will be limited. **Additionally,** to utilize Drop-in, you must have a current credit card with us on file to be charged, as we will not be able to accept in person payment at pick up. We do not send invoices, however if you need a receipt for your paid tuition just let us know, and we can provide you with one.

|                     |  |
|---------------------|--|
| <b>Drop-in Fee:</b> | <b>\$15.00/hour</b> <ul style="list-style-type: none"> <li>• \$7.50 minimum charge - up to the first 30 minutes.</li> <li>• \$3.75 per 15 - minute increment (after initial 30 min)</li> </ul> |
|---------------------|--|

**If you are interested in enrolling your child for the 2020-2021 school year, please complete the attached registration form and mail to the Harford Heights mailing address:**

- 1 William Court, Sparks, MD. 21152 **along with your \$50.00 registration fee.**

**Registration:** To participate in **any** Harford Heights After-School Program, you must pre-register by completing the attached registration form and submitting it along with a **\$50.00 one-time only registration fee**, that remains valid throughout your child's *continuous* enrollment at Garrison Forest School. In addition, you must complete and return all required state and local forms by the first day of after school service. These forms are located on the website on the Garrison Forest Page, under "Maryland State Forms" & "Harford Heights Forms". [Click here](#) for on-line access.

The Harford Heights Program is responsible for the billing and collection of all fees as well as responding to all program questions. For additional registration information, and answers to any questions concerning our program, please contact either Lenore Rudick or Michele Berman via email or cell phone below.

We encourage you to talk with any of our past parents, who I am sure will give you a favorable reference. We can provide names and contact info of past parents upon request.

Sincerely,

Lenore Rudick  
 Administrative Director  
[lenoreruth@yahoo.com](mailto:lenoreruth@yahoo.com),  
 Cell: 410-375-4557

Michele Berman  
 Director  
[Micheleberman8@gmail.com](mailto:Micheleberman8@gmail.com)  
 Cell 443-996-8418



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**GARRISON FOREST REGISTRATION FORM (2020-2021 SCHOOL YEAR)**

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade (fall of 2020) \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade (fall of 2020) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Mother's Name \_\_\_\_\_ Work # \_\_\_\_\_

Father's Name \_\_\_\_\_ Work # \_\_\_\_\_

Please check **EITHER Full or Early Session:**

Please check # **afternoons/week:**

|   |                   |                   |                   |                   |                   |
|---|-------------------|-------------------|-------------------|-------------------|-------------------|
| <ul style="list-style-type: none"> <li>• ____ <b>Full Session:</b> 3:30 pm - 6:00 pm</li> <li>• ____ <b>Early Session:</b> 3:30 pm - 5:00 pm</li> </ul> | <b>5</b><br>_____ | <b>4</b><br>_____ | <b>3</b><br>_____ | <b>2</b><br>_____ | <b>1</b><br>_____ |
|---|-------------------|-------------------|-------------------|-------------------|-------------------|

\* For 1 - 4-day program, please **indicate which day(s):** \_\_\_\_ Mon \_\_\_\_ Tues \_\_\_\_ Wed \_\_\_\_ Thurs \_\_\_\_ Fri

\_\_\_\_ **Emergency/Drop-in hourly care:** \$15.00/hour\*

\*\$7.50 minimum, up to the first 30 minutes; \$3.75 per 15 – minute additional increment(s).

\_\_\_\_ **Registration Fee** of \$50.00 enclosed. One-time only fee.

Parent signature \_\_\_\_\_ Date \_\_\_\_\_

**CREDIT CARD INFORMATION** *We accept Visa, Master Card, AMEX, & Discover*

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVC#: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Phone Number of Cardholder: \_\_\_\_\_

Address of Cardholder: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Amount to be charged: \_\_\_\_\_ Registration Fee (\$50.00) or \_\_\_\_\_ Tuition of \$ \_\_\_\_\_

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