The total cost for AISD Third Base After School Care during the 2021-22 school year will be $2780 ($295 mo.). Reduced Lunch tuition will be $1840 ($195 mo.) and Free Lunch Tuition will be $1325 ($140 mo.). Each tuition level is based on 177 days of school and will be divided into 10 monthly payments. In addition to the monthly fee, a one-time $25 registration fee per family is required upon enrollment. Please see the second page for a complete monthly fee schedule. If you need more information, please call 512-414-0220.

To enroll, please complete (without exception all blanks must be filled out) the Registration/Release form, the Discipline and Guidance Policy & Tuition Express (card/check) authorization form. Search austinisd.org/third-base to print forms. Scan & email or US mail to the address below:

AISD Third Base
4000 S. IH 35 Frontage Road/5th Floor
Austin, TX 78704

PH: 512-414-0220
Email: mary.degollado@austinisd.org
# 2021-22 AISD THIRD BASE After School Care

## MONTHLY FEE SCHEDULE

Serving children in Pre-K4 to 5th Grade

<table>
<thead>
<tr>
<th>Payment #</th>
<th>Due Date</th>
<th>Full</th>
<th>Reduced*</th>
<th>Free*</th>
</tr>
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<tbody>
<tr>
<td>1</td>
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<td>$125</td>
<td>$85</td>
<td>$65</td>
</tr>
<tr>
<td>2</td>
<td>September 3</td>
<td>$295</td>
<td>$195</td>
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<td>3</td>
<td>October 1</td>
<td>$295</td>
<td>$195</td>
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<tr>
<td>4</td>
<td>November 5</td>
<td>$295</td>
<td>$195</td>
<td>$140</td>
</tr>
<tr>
<td>5</td>
<td>December 3</td>
<td>$295</td>
<td>$195</td>
<td>$140</td>
</tr>
<tr>
<td>6</td>
<td>January 7</td>
<td>$295</td>
<td>$195</td>
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<td>8</td>
<td>March 4</td>
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<td>9</td>
<td>April 1</td>
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<tr>
<td>10</td>
<td>May 6</td>
<td>$295</td>
<td>$195</td>
<td>$140</td>
</tr>
</tbody>
</table>

**TOTAL**  
$2780          $1840           $1325

In addition to the monthly fee, a one-time $25 registration fee is charged per family upon enrollment.

*A copy of the AISD Eligibility Reduced lunch letter or an AISD Income Verification Form must be provided for the lower fee.

A $35 late fee will be added, if the monthly payment is received after the 10th.
Welcome Families....
AISD Third Base After-School Child Care provides child care where children can learn, thrive, relax and have fun.

Working with parents, teachers, and other school staff, AISD Third Base care givers develop activities that enhance the regular school curriculum. All activities are conducted in indoor and outdoor space that is organized, safe, fun and challenging to children.

You are an important part of AISD Third Base. Feel free to talk to the staff about your child’s needs and how we can meet them.

AISD Third Base After-School Care is open to children enrolled in the host school (Pre-K4 to 5th grade). Admission is on a first-come first-served basis as openings occur. If there are no current openings, your child’s name may be placed on a waiting list. You will be notified as space becomes available.

To enroll your child, you must complete and return the...

* Registration Form
* Discipline & Guidance Policy Form
* Tuition Express Enrollment Form

Enrollment in the AISD Third Base After School Program is not complete until a registration form with required information has been completed and submitted along with the required tuition. Forms and payments must be returned to the AISD Third Base main office. Please allow 48 hours for processing of registration before your child may start.

AISD Third Base will follow guidance/recommendations from the CDC and Austin ISD as it pertains to COVID-19 protocols for the 2021-22 school year.

Tuition & Fees
Full tuition for the 2021-22 school year is $2780. Tuition is due on the first Friday of the month. Care on C-days will be $30 per day (pending COVID restrictions). Reduced rates are available for families that qualify.

Tuition received after the tenth business day of the month is considered late and a $35 late fee will be charged to the account. If full tuition is not received in Third Base’s business office by 5:30pm on the 16th day of the month, after-school care services will be terminated immediately. To enroll a child, all past due fees must be paid plus a $25 re-registration fee. For each day a child attends AISD Third Base after termination for non-payment, parents will be charged an additional $10 penalty per day per child.

Acceptable form of payment:
Tuition Express (Visa, MasterCard or check on-line automatic payment processing).

Fee Assistance
Free/Reduced lunch forms, as issued by the Austin-ISD, must be submitted along with registration and payment, in order to apply for fee assistance.

Days & Hours of Operation
AISD Third Base After-School Care operates on days when school is in session. If school is out due to “C” day, Third Base will provide care at a designated school(s). If school is out due to bad weather or a holiday, AISD Third Base will also be closed.

AISD Third Base operates from the time school is out until 6:00pm.

A $1.00 per minute late charge will be assessed.
Licensed Facility
All AISD Third Base sites are licensed by the Texas Department of Health and Human Services (DHHS). All staff are trained in CPR/First Aid and receive training in Child Care related fields. You may visit the DFPS website at www.dfps.state.tx.us

Children/Adults Not in Program
In order to maintain the highest safety and security for children in and out of AISD Third Base during program hours, children not enrolled in the program cannot participate in AISD Third Base activities—indoor or outdoor—at any time.

Pick Up & Sign Out
When picking up your child, please do not forget to sign out. This helps ensure that your child has been picked up safely.

Children will not be allowed to leave the program without permission from parents or guardians. When adults unknown to staff pick up children, staff will check identification and verify the person is on the authorized pick-up list.
A $1.00 per minute late charge will be assessed for late pick up (after 6:00 P.M.). Care may be terminated for excessive late pickups and/or non-payment or late pickup fees.

Attendance/Absences
Anytime your child will not be attending AISD Third Base Child Care but is not absent from school, please call the staff to inform them that your child will be out for that day. Please note: There will be no refunds or credits of tuition for days your child does not attend AISD Third Base Child Care.

Illness
If your child becomes ill or gets hurt during AISD Third Base Child Care, we will make him or her as comfortable as possible and call you. If your child is very uncomfortable and/or show signs of contagious illness, you must pick up your child as soon as possible. Please note: There will be no refunds or credits of tuition for days your child does not attend AISD Third Base Child Care.

Medications
If your child is taking any medication which must be administered during his or her time at AISD Third Base, you must check in those medications with the AISD Third Base staff. Children will not be allowed to administer their own medications. AISD Third Base staff will administer medication to your child. Parents must complete a form authorizing AISD Third Base staff to administer the medication. Staff will record each dose of medication administered.

Prescription Medications must be in the original container labeled with the child’s name, a date, directions and the physician’s name.

Non-prescription medication must be labeled with the child’s name and the date the medication was brought to the center. Non-prescription medication must be in the original container.

AISD Third Base staff must administer it according to label directions.

Behavior Policy: Positive Guidance
In order to ensure that AISD Third Base After-School Care is safe and effective, we need the cooperation of all children, parents and staff. If a discipline problem arises with a child, staff will work to provide positive guidance for that child. If the problem continues after reasonable attempts to solve it, care may be suspended and/or terminated.

Children with Special Needs
If your child has special needs, please discuss those needs with the staff. Staff will assess those needs and make reasonable efforts to accommodate your child, provided taking such steps would not fundamentally alter the nature of the program. AISD Third Base centers are group child care facilities and are not equipped to provide individual, one-on-one care. Children must be potty trained.

Snacks
Your child will be served a nutritious snack each day. Please do not send extra food with your child unless a special medical condition exists or special
Personal Belongings
Children’s personal belongings, such as games, cards, toys and other items brought from home, cannot be permitted at AISD Third Base unless arrangements have been made with AISD Third Base staff. AISD Third Base is not responsible for personal belongings that are lost or broken during program hours.

Visiting Your Child at AISD Third Base
You may visit the program at any time. Please note that AISD Third Base staff is responsible for supervision of the children at all times and must limit their conversations with parents. If you would like to have a conference with staff, please schedule a time with the Third Base Site Director.

Bad Weather Policy
When the school closes because of bad weather, AISD Third Base will also be closed.

Emergencies
In case of an emergency involving your child, Third Base staff will call you immediately to discuss the matter with you. If there is an emergency that will cause you to be late in picking up your child, please be sure to call AISD Third Base staff as soon as possible.

Immunization Requirements
All immunization requirements are compliant with standard AISD immunization policy. Records are kept in the school’s main office.

Tuberculin Testing
All tuberculin testing requirements are compliant with standard AISD tuberculin testing policy. Records are kept in the school’s main office.

AISD Third Base will follow guidance/recommendations from the CDC and Austin ISD as it pertains to COVID-19 protocols for the 2021-22 school year.

Hearing and Vision Screening
All hearing and vision screening requirements are compliant with standard AISD hearing and vision screening policies. Records kept in the school’s main office.

Transportation
Any transportation of children in AISD Third Base Child Care will be conducted by the Austin-ISD.

Any volunteer, and/or chaperones, attending AISD Third Base field trips will be subject to a criminal history check conducted by the Austin-ISD.

Water Activities
AISD Third Base will not participate in swimming-related water activities.

Field Trips
In the event of a field trip, parents will be notified and permission slips will be required prior to any child participating in an off-campus activity.

Animals
AISD Third Base prohibits contact between children in care and any animal on campus. In the event a child brings an animal to care, such as a “class pet”, animal must remain in the cage/aquarium throughout the entire day at AISD Third Base. If a child is bitten, or scratched, by an animal in AISD Third Base, the child’s parents will be notified, and first aid will be administered.

Outdoor Play Equipment
AISD Third Base children access outdoor play equipment and playscapes on Austin ISD campuses that do not meet State Licensing standards.

Concerns
If you have any concerns regarding the level of care or other aspects of AISD Third Base Program, please discuss with the Third Base Site Director or call 414-0220.
Lice
Staff will notify parents of any child found to have head lice. Parents will be provided with lice education information to help treat the head lice. Children may return after a successful treatment. Upon return, the child’s head will be checked by staff. If the child is found to have lice, the parent will be notified and child will be allowed to return after successful treatment. If lice continues for an extended period, the child will not be able to return until all lice is gone. There is no financial or time compensation for missed days.

Parent Participation
Parents of children in AISD Third Base are invited to participate in center activities. However, if said participation becomes a distraction, or in some way puts children in the center at risk, parents may be asked to refrain from further participation.

Parents of children in AISD Third Base are encouraged to submit questions and suggestions.

Minimum Standards Review
Parents are invited to review the Texas Department of Family and Protective Services Minimum Standards Guide. A copy of the Minimum Standards Guide is kept on site for parents to review at all times.

Parents are invited to review the site’s most recent licensing report. This report is posted on site, at all times, and additional information relating to past inspections can be found by visiting the DFPS website (www.dfps.state.tx.us).

How to Contact TXDFPS
Local Licensing Office
14000 Summit Drive, Suite 100
Austin, Texas 78728
(512) 834-3195

Child Abuse Hotline 1-800-252-5400

Sunscreen/Insect Repellent
AISD Third Base staff do not administer sunscreen or insect repellent. Parents must apply before children arrive to AISD Third Base.
Austin Independent School District  
Dept. of School, Family & Community Education  
Third Base After School Child Care  
Registration Release

For Office Use Only

AISD THIRD BASE  
4000 S. IH 35 Frontage Road/5th Floor  
Austin, TX 78704

Start Date____________________

School/Escuela _________________  
PH 512-414-0220  
FX 512-414-1228

GRADE/Grado_________(as of August 2021)  
Student ID#________________  
email: mary.degollado@austinisd.org

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### Child Information / Información del Niño

<table>
<thead>
<tr>
<th>Male/Nino</th>
<th>Female/Nina</th>
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- **Child’s Name**: Nombre del Niño_________________________.  
- **Birth Date**: Fecha de Nacimiento______________/_______/_______

- **First/Nombre**:  
- **Last/Apellido**: ____________________________

- **Address / Dirección**: ____________________________________________  
- **ZipCode/Código Postal**: ____________________________  
- **Phone/Teléfono**: ____________________________

---

### Guardian Information / Información de Custodio Legal

- **Mother’s Name**: Nombre del Madre____________________________________________________
- **Father’s Name**: Nombre de la Padre________________________________________

- **Address (if different from child)**: Dirección (si es diferente de la del niño)________________________________________

- **Mother’s place of employment**: Lugar de trabajo del madre________________________________________
- **Father’s place of employment**: Lugar de trabajo de la padre________________________________________

---

### Important Phone Numbers / Números Telefonicos Importantes

**Phone numbers while child is in care / Números telefónicos mientras su hijo(a) está en el centro:**

- **Mother (guardian) / Madre (custodio legal)**
  - Home / casa ____________________________
  - Work / trabajo ____________________________
  - Cell / celular ____________________________
  - Email ____________________________

- **Father (guardian) / Padre (custodio legal)**
  - Home / casa ____________________________
  - Work / trabajo ____________________________
  - Cell / celular ____________________________
  - Email ____________________________

---

### Pick up Authorization / Autorización para Recoger al Estudiante

**Persons authorized to pick child up / Personas autorizadas para recoger al niño(a):**

- **Name/Relationship**: Nombre/Relación_________________________.  
- **Address**: Dirección_________________________.  
- **Phone**: Teléfono_________________________.

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<thead>
<tr>
<th>Name/Relationship</th>
<th>Address</th>
<th>Phone</th>
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<th>Address</th>
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<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>
Medical Information / Información Médica    STUDENT:______________________________

THIRD BASE Location:_______________________

Please list any special problems your child may have such as allergies, illness, any medication prescribed and any information of which staff should be aware. Include any serious illness, injuries and/or hospitalization in the last 12 months.

Por favor escriba cualquier problema especial que su hijo(a) padezca como alergias, enfermedades, medicamentos prescritos o cualquier otra información que nuestro personal deba saber. Incluya información sobre enfermedades, heridas y/o hospitalizaciones durante los últimos 12 meses.

_______________________________________________________________________________________________________________________

_______________________________________________________________________________________________________________________

_______________________________________________________________________________________________________________________

Child’s Doctor / Médico del Niño(a) ___________________________________________________________  Phone / Teléfono ____________________

Address / Dirección ________________________________________________________ ______________

Authorization for Emergency Medical Treatment /
Autorización para Tratamiento Médico de Emergencia

In case the child named on this form has an accident or sudden illness, and in the event I cannot be reached by telephone, I hereby authorize a representative of AISD to refer the child to the physician named above or seek appropriate medical care. AISD cannot be responsible for any costs incurred.

En caso que el niño(a) mencionado en esta forma sufra un accidente o enfermedad repentina, y en caso que no me puedan localizar por teléfono, autorizo a un representante de Austin ISD a llevar a mi hijo(a) con el médico antes mencionado o solicitar servicio médico apropiado. Austin ISD no será responsable de los gastos que surjan.

Parent / Guardian Signature
Padre o Madre / Custodio Legal Firma__________________________  Date / Fecha ____________________

Relative or friend to contact in case of emergency (if parents cannot be reached).
Pariente o amigo para llamar en caso de emergencia (si no se localiza a los padres).

Name / Nombre _________________________________________________________________________________  Phone / Teléfono _________________

Address/Dirreción______________________________________________________________________________________________________________

I hereby authorize AISD Third Base staff to access my child’s immunization records in the school’s office.

Doy mi autorización al personal de Third Base de Austin ISD para tener acceso a los registros de vacunas de mi hijo(a) en la oficina de la escuela.

Yes / Si ☐  No ☐

I hereby grant permission for my child to be transported and supervised by AISD Third Base staff during sponsored field trip. I understand that I will be informed in advance of any field/study trip.

Doy mi consentimiento para que mi hijo(a) sea transportado y supervisado por personal de ThirdBase de Austin ISD durante excursiones/ viajes de estudio. Entiendo que se me informará con anticipación sobre cualquier excursión/ viaje de estudio.

Yes / Sí ☐  No ☐

I have received from AISD Third Base staff a copy of “A Parent’s Guide to Day Care”.
Recibi de parte del personal de ThirdBase de Austin ISD una copia de “A Parent’s Guide To Day Care”. [Guía para padres sobre guarderías] (Se puede obtener el primer día.)

Yes / Sí ☐  No ☐

Photographs or other images of my child in Third Base may be used for educational and non-commercial purposes.

Las fotografías o otros imágenes de mi hijo(a) en Third Base pueden usarse con propósitos educacionales y sin fines de lucro.

Yes / Sí ☐  No ☐

Child daycare operations are public accommodations under the Americans with Disabilities Act (ADA), Title III. If you believe that such an operation may be practicing discrimination in violation of Title III, you may call the ADA Information Line at (800)514-0301 (voice) or (800)514-0383 (TTY).

Parent / Guardian Signature
Padre o Madre / Custodio Legal Firma__________________________  Date / Fecha ____________________
Discipline and Guidance Policy for AISD THIRD BASE AT

Name of Operation

• Discipline must be:
  (1) Individualized and consistent for each child;
  (2) Appropriate to the child’s level of understanding; and
  (3) Directed toward teaching the child acceptable behavior and self-control.

• A caregiver may only use positive methods of discipline and guidance that encourage self-esteem, self-control, and self-direction, which include at least the following:
  (1) Using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
  (2) Reminding a child of behavior expectations daily by using clear, positive statements;
  (3) Redirecting behavior using positive statements; and
  (4) Using brief supervised separation or time out from the group, when appropriate for the child’s age and development, which is limited to no more than one minute per year of the child’s age.

• There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited:
  (1) Corporal punishment or threats of corporal punishment;
  (2) Punishment associated with food, naps, or toilet training;
  (3) Pinching, shaking, or biting a child;
  (4) Hitting a child with a hand or instrument;
  (5) Putting anything in or on a child’s mouth;
  (6) Humiliating, ridiculing, rejecting, or yelling at a child;
  (7) Subjecting a child to harsh, abusive, or profane language;
  (8) Placing a child in a locked or dark room, bathroom, or closet with the door closed; and
  (9) Requiring a child to remain silent or inactive for inappropriately long periods of time for the child’s age.

Texas Administrative Code, Title 40, Chapters 746 and 747, Subchapters L, Discipline and Guidance

My signature verifies I have read and received a copy of this discipline and guidance policy.

________________________________________________________   _________________
Signature          Date

Check one please:

___ parent        ___employee/caregiver        ___ household member of child-care home

TDPRS-CCL 06/02/03
Reglamentos de Guía y Disciplina para Third Base en la escuela de ________________________________

La disciplina tiene que ser:
(1) Personalizada y uniforme para cada niño
(2) Adecuada para el nivel de entendimiento del niño
(3) Orientada a la enseñanza del niño del comportamiento adecuado y el control de sí mismo

Solamente puede utilizar métodos positivos de disciplina y orientación que fomenten la autoestima, el control de sí mismo y la conducta independiente, y por lo menos incluyan lo siguiente:
(1) Usar elogios y fomentar el buen comportamiento
(2) Recordar a los niños las expectativas de comportamiento diariamente utilizando frases claras y positivas
(3) Cambiar el comportamiento utilizando frases positivas
(4) Usar un tiempo breve de alejamiento del grupo, bajo supervisión, cuando sea adecuado para la edad y el desarrollo de niño, limitado a no más de un minuto por cada año de edad del niño.

Ningún niño debe ser tratado de manera severa, cruel o fuera de lo común. Los siguientes tipos de disciplina y orientación están prohibidos:
(1) Castigo corporal o amenazas de castigo corporal
(2) Castigos asociados con la comida, la siesta o el entrenamiento para usar el baño
(3) Pellizcar, sacudir o morder al niño
(4) Pegar un niño con la mano o con un objeto
(5) Poner cualquier cosa dentro de la boca del niño o sobre ella
(6) Humillar, ridiculizar, rechazar o gritarle a un niño
(7) Someter al niño a escuchar un lenguaje severo, abusivo o grosero
(8) Meter a un niño dentro de un cuarto, baño o clóset oscuro o con la puerta cerrada con llave
(9) Hacer que el niño se mantenga callado o inactivo por periodos de tiempo largos e inadecuados para su edad

Mi firma es verificación que e leído y recibido una copia de la póliza de disciplina.

__________________________  ______________________
Firma                                                                      Fecha
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 (business name) 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

☐ Checking  ☐ Savings

Routing Transit Number (see sample below)  Account Number (see sample below)

For Official Use Only

Date Received

Employee Signature

Attach Voided Check Here

Copyright Procare Software 12082014