



2024-2025 School Year

Parent Handbook

Welcome Parents and Students to the 2024-2025 School Year!

We are so excited to have you as a part of our Fun Family this year! The Funplex has undergone a few changes and has much more to offer in this upcoming school year.

The Funplex's Mission is to inspire children to thrive, promote extended learning, and foster collaboration by listening, working together, and effectively communicating.

Our Vision is that youth experience quality care during after-school hours, summer, and other opportunities that allows for intellectual, creative, and healthy developmental growth.

The Funplex of Gulf Breeze

**3123 Gulf Breeze Parkway,
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Website: www.the-funplex.com**

Statement of Services:

- The After School Activities Program (ASAP) offers
 - Care for school aged children attending Kindergarten – 8th grade.
 - Before care (Oriole Beach ONLY)- drop off between 7am-7:50am.
 - After School Care- pickup by 6:30pm.
 - Transportation offered from Oriole Beach Elementary and Gulf Breeze Elementary ONLY.
 - Parents of Gulf Breeze Middle School students wanting their children to attend ASAP are responsible for notifying the school so that their child rides the appropriate bus. The bus drops off directly in front of the Funplex (students do NOT cross Highway 98).
 - Drop-in rates are available for students not being transported by the Funplex.
 - Space is limited and daily drop ins are NOT guaranteed a spot if you do not register at least 24 hours in advance.

Enrollment and Tuition:

The Funplex After School Activities Program admits elementary and middle school students from ages 5-13. Children may attend before care, after care, or both.

- Before care is offered for Oriole Beach Elementary **ONLY** and begins at 7am. Children **MUST** be dropped off and signed in by 7:50am. **No children will be accepted after 7:50am.** Children will be walked to OBE and dropped off accordingly at 8am.
- The After School Activities Program (ASAP) will run for Gulf Breeze Elementary, Oriole Beach Elementary, and Gulf Breeze Middle School students. This program will run from immediately after school until 6:30pm. Parents/guardians must pick up their child by the end time of 6:30pm.

A registration fee of \$60 is due upon enrollment (of one child, \$95 per family). This is an annual, non-refundable charge. If a child withdraws and reenrolls in the next year, a new enrollment fee will be expected- whereas if he withdraws and reenrolls within the calendar year (Jan-Dec), the fee will be waived.

Tuition for care is due monthly in one payment to be withdrawn from your account on the 1st of each month. This fee is late after the 10th day.

**If you require a special payment method, you must inform this upon your enrollment into the program. The payment will be broken into 2 payments due on the 1st and 15th of each month.*

To enroll, each child must turn in:

- This signed packet
- Rules & Discipline agreement
- Program Registration form
- Emergency Card
- Pickup Authorization form
- Tuition Contract
- Medication form (If applicable)

Fees:

A \$15 fee is charged on the 10th of each month for late tuition payment. And another \$15 is incurred weekly if the tuition is not paid. Anyone who fails to pick up before or at the time of closing (6:30pm) will be charged an additional \$20 per 15 minutes. A service fee of \$25 will be charged for any **returned checks.**

Any changes to your regularly scheduled days **must** be made at **least 24** hours prior to the change. Otherwise, regular tuition or payment will be required.

Tuition prices do not change for months with holidays.

ELC Vouchers

The Funplex is happy to accept the School Readiness Vouchers from the ELC. You must go through the ELC to enroll and request care from the Funplex. You will be required to pay your “co-pay” along with the differential of the ELC payments and the Funplex charges. There will be a required weekly payment of \$25/child enrolled in the ELC to go towards this fee. The remaining amount (if any) will be due at the beginning of the following month.

Drop In:

Drop-in rates for ASAP are charged upon arrival. Drop-in space is not guaranteed.

Rates: \$45/day

Refunds/Credits

Your child has a reserved spot in our transportation vehicles. Payment is still due even if your child does not attend our program any day of the week. There are NO discounts or credits for days missed. You are financially responsible for full payment for the days you originally signed up for.

*The afterschool program will be having day camps on:

Teacher Planning Day – October 14th

Veterans Day – November 11th

Thanksgiving Break – November 25th-29th

Winter Break – December 30th-31st

And January 2nd-3rd

Teacher Planning Day – January 6th

MLKJ Day – January 20th

Presidents Day – February 17th

Spring Break – March 17th-21st

Teacher Planning Day – March 24th

Good Friday – April 18th

Summer camp begins Monday, June 2nd

All dates subject to change based on enrollment

***Please note that these dates may change due to unforeseen circumstances and parents will be notified of any changes as soon as possible.**

Withdrawal and Dismissal Policy:

A 30-day notice is required before withdrawing a child from the Funplex. Your account must be paid in full before withdrawing – including your child’s tuition for the last month.

The director of the Funplex reserves the right to cancel the enrollment of a child at his/her discretion, or for the following possible reasons:

- Non-payment or excessive late payments of tuition and fees.
- Not observing the rules of the center as outlined in the parent policy contract.
- Physical and/or verbal abuse of staff or children by parent or child.

Each child/family must have an active account with the Funplex. You can create an account by going to our website, www.the-Funplex.com and click “Join our fun family”.

Communication:

Proper communication between our parents and the staff at the Funplex is extremely important. Staff will be sending home information regularly. Concerns about any aspect of our program, or your child’s care, may be expressed to the center director. For daily notes and information, please pick up upon checkout.

Remember to communicate in writing any changes in your child’s schedule. **We must be informed, in writing, regarding any changes in the person picking up your child.** You may add or delete names of authorized adults allowed to pick-up your child on the *Child Pick-Up Authorization form*.

Please inform the front desk if there are changes that need to be made to any of the following:

- Address and/or phone numbers, or email address.
- Health/immunizations updates,
- Other pertinent information related to your child.
 - It is important to note that some children in care will not have immunizations.

Drop off and Pickup Policies:

Only the individuals listed on the *Child Pick-Up Authorization form*, or on a written permission note from the parent, will be allowed to leave with a child. The staff is expected to request a picture I.D. from any unfamiliar person (including grandparents). If there is any concern, the Funplex staff reserves the right to deny a person’s request to pick up a child.

Parents are expected to assume full responsibility for their child once they are brought to them/sent up to them (Funplex ASAP).

We discourage leaving your idling vehicle in the parking lot during drop off/pick up. In case of extreme cold or heat,

please make your transitions brief so the vehicle is not left unattended for a long period of time. NEVER leave a child in an idling vehicle unattended.

Building Security and Access:

You will be required to show your I.D. upon pickup. If another parent is picking up your child who also has a child enrolled, you must call ahead and inform of the change.

Custody Orders:

Until custody has been established by a court action, one parent may not limit the other from picking up a child in our care. The Funplex must be notified immediately of any changes in custody orders. Certified custody orders must be given to the Funplex director.

Unexpected Closures/Changes:

On rare occasions, we may be forced to close our doors due to a situation beyond our control (power outage, hurricane, no water service, flooding, etc.). Every attempt will be made to inform parents of an emergency closing.

To stay informed on closures and other important information, please download the Remind app and enable notifications.

Use this link to enroll if your child attends OBE:

remind.com/join/funasapobe

And use the class code **funasapobe**.

Use this link to enroll if your child attends GBE:

remind.com/join/funasapgbe

And use the class code **funasapgbe**.

The Funplex staff will be sending out messages for the first week of school when students have arrived at their destination.

Child Abuse and Neglect:

Staff members are required by law to report any suspected child abuse or neglect. Teachers are trained in what to watch for and how to properly report it.

Treasures and Possessions:

ASAP: There are absolutely no toys/knickknacks/trading cards/or other possessions allowed during ASAP hours. If a student has brought these items to school, they must remain **in their backpack** until their parent/guardian arrives. If a student is found with one of these items or similar items, the item will be confiscated until the child's parent/guardian arrives. If the issue persists, the director reserves the right to suspend and/or expel the child from the program for refusing to abide by the rules.

The Funplex is NOT responsible for any lost or damaged items and encourages all children of all ages to leave personal belongings at home.

There is to be absolutely no gum, toy guns, or candy (unless given permission in regard to a special holiday/celebration) brought to the program.

Prohibited items consist of (but are not limited to): guns/weapons, matches, fireworks, lighters.

Clothing:

ASAP: Children may remain in their school wear or bring a comfortable change of clothes. Girls must bring/wear shorts under dresses to participate on the bounce houses. All children must be capable of putting on their own clothes, including buttons, zippers, etc. **All children must wear shoes that they are able to fasten.**

We recommend sending a change of clothes with your child if they are prone to accidents (don't forget the socks!).

Meals, Snacks, and Food Allergies:

ASAP: Children will be given a choice of two snacks during snack time. They will also have the opportunity to purchase snacks from our café area if parent permission is given upon enrollment.

*Parents may provide breakfast for their child given that their drop-off time is before 8:00am. Food must be simple and self-serving (i.e., yogurt, fruit, breakfast bar, dry cereal, etc.). We ask that you let staff know if you have given your child breakfast.

Medicine:

Non-prescriptive medication (Tylenol, nose drops, etc.) as well as prescription medication will only be administered after a parent signs and dates a medical form. The parents must provide all medications.

Prescription medication must be in the original container and labeled with the child's name. A parent or guardian must administer the first dosage under their supervision: never the Funplex staff. We will not administer cold medications to any child.

Staff cannot administer medication (prescription or over the counter) without the proper dosage for that child listed on the container. If the container reads, "Consult/see doctor", then a note from the

doctor with the child's weight, and the dosage recommended, must be provided.

Medication will be stored per the manufacturer's recommendations.

Injuries and Accidents:

Every consideration will be taken to ensure the safety of your child in our care. Should an injury occur, an Incident Report will be completed by the closest adult and signed by the director or appropriate person. A copy of this report will be sent home, and the Funplex's copy will require a parent/guardian signature upon pickup.

In the event of a major emergency or accident, the center teacher or director will call 911 first. The child will be transported to the hospital noted on the Emergency Card (or the closest hospital). The parent/guardian will be called immediately.

Closing:

We are thrilled to have you and your child as part of our program! Please read the following ASAP rules with your child so we may endure a safe and fun-filled year!

ASAP Rules

- **HAVE FUN!!!**
- **Participants must treat other students, counselors, and all staff with RESPECT. Speak kind words.**
- **Participants must listen and follow directions given by all counselors and staff. We give directions to keep children in ASAP happy and safe. Undermining authority will not be tolerated.**
- **Participants must keep hands, feet, and other objects to oneself. Participants will not touch someone else's belongings.**
- **Participants shall not intentionally cause or attempt to cause physical or emotional harm to another student or employee. BULLYING WILL NOT BE TOLERATED.**
- **Participants must treat Funplex equipment, supplies and facility properly and with care.**
- **Participants shall always remain with their groups. If a student needs to take a bathroom or water break, they MUST tell a counselor.**

Statement of Acknowledgement

I have read the terms of this program and explained them to my child(ren) and we both understand and agree with what is written.

Parent/Guardian Signature

Date

Discipline and Expulsion Policy

Children are expected and required to be respectful and kind to their coaches, peers, and themselves. Any child that does not meet and follow that expectation will be subject to expulsion following the steps listed below.

Step 1 – Warning

Step 2 – Time-out/Write sentences

Step 3 – Incident report

Step 4 – Contact parent immediately

Step 5 – Suspension decided by director *

***Three suspensions result in expulsion.**

The director reserves the right to remove a child from the program without following all the aforementioned steps if that child poses a danger to himself or others.

The actions resulting in these steps include but are not limited to:

Talking back, disrespecting others, not following directions, name calling, threatening, leaving designated area without permission, biting, pinching, fighting, bullying (verbal or physical), destruction of property.

I, _____, parent/guardian of _____, have read and understand the above rules. I assume the responsibility for ensuring that my child is aware of these rules and understands the consequences if he/she does not behave appropriately.

Parent Signature: _____ Date: _____

* The child care facility shall adopt a discipline policy consistent with Section 402.305(12), F.S., including standards that prohibit children from being subjected to discipline which is severe, humiliating, frightening, or associated with food, rest, or toileting. Spanking or any other form of physical punishment is prohibited.

The following discipline techniques shall be prohibited in the child care facility:

1. The use of corporal punishment/including, but not limited to:
 - a) Hitting, spanking, shaking, slapping, twisting, pulling, squeezing, or biting;
 - b) Demanding excessive physical exercise, excessive rest, or strenuous or bizarre postures;
 - c) Compelling a child to eat or have in his/her mouth soap, food, spices, or foreign substances;
 - d) Exposing a child to extremes temperature;
 - e) Rough or harsh handling of children, including but not limited to: lifting or jerking by one or both arms; pushing; forcing or restricting movement; lifting or moving by grasping clothing; covering a child's head.
2. Isolating a child in an adjacent room, hallway, closet, darkened area, play area, or any other area where the child cannot be seen or supervised.
3. Binding, tying or restrict movement, or taping the mouth;
4. Using or withholding food or beverages as a punishment;
5. Toilet learning/training methods that punish, demean, or humiliate a child;
6. Any form of emotional abuse, including rejecting, terrorizing, extended ignoring, isolating, or corrupting a child;
7. Any abuse or maltreatment of a child;
8. Abusive, profane, or sarcastic language or verbal abuse, threats, or derogatory remarks in front of the child or about the child or child's family;
9. Placing a child in a crib/portable crib for a time-out or for disciplinary reasons.

"Discipline will never be related to food, rest, toileting or active play."

- Active play, both indoor and outdoor, must not be completely withheld from children who misbehave. For example, a child being left in the front office the entire time the rest of the children go outside to play would be unacceptable. Time-outs may be used during indoor or outdoor play provided an age-appropriate time limit has been established

Tuition Pricing

Oriole Beach Elementary (ASAP only)		
	Monthly Payments	
# of Days/Week	One Child	Sibling(s)
2	\$295	\$259.60
3	\$330	\$290.40
4	\$365	\$321.20
5	\$400	\$352

Gulf Breeze Elementary (ASAP only)		
	Monthly Payments	
# of Days/Week	One Child	Sibling(s)
2	\$320	\$281.60
3	\$355	\$312.40
4	\$390	\$343.20
5	\$425	\$374

Oriole Beach Elementary (Before and After Care)		
	Monthly Payments	
# of Days/Week	One Child	Sibling(s)
2	\$345	\$303.60
3	\$380	\$334.40
4	\$415	\$365.20
5	\$450	\$396

Middle School Pricing	
\$25/Day	\$70/Week

Transportation Only	
OBE	\$15/day
GBE	\$25/day

Program Registration Form

Child 1	First Name	Last Name	Date of Birth	Sex (M or F)	Grade

Circle the program your child will be attending:

Oriole Beach Elementary After School

Oriole Beach Elementary Before & After School

Gulf Breeze Elementary After School

Circle the day your child will be attending:

Monday

Tuesday

Wednesday

Thursday

Friday

Café Charging

I will allow my child to charge café items **Y / N**. Daily amount \$_____.

Child 2	First Name	Last Name	Date of Birth	Sex (M or F)	Grade

Circle the program your child will be attending:

Oriole Beach Elementary After School

Oriole Beach Elementary Before & After School

Gulf Breeze Elementary After School

Circle the day your child will be attending:

Monday

Tuesday

Wednesday

Thursday

Friday

Café Charging

I will allow my child to charge café items **Y / N**. Daily amount \$_____.

Parent (1) First Name	Last Name	Cell Phone #	Secondary Contact Number
Parent (2) First Name	Last Name	Cell Phone #	Secondary Contact Number
Street Address		City	Zip Code
Street Address 2 (if applicable)		City	Zip Code
Child lives with (Circle)	Mother	Father	Both
			Other (specify):

Emergency Card

Date: _____

Child's Name: _____

Family's Name:

Mother: _____

Father: _____

Home Address: _____

Program: ___ Funplex ASAP ___ Funplex FunCare ___ Summer Camp

Mother's Employer: _____

Address: _____ Phone: _____

Father's Employer: _____

Address: _____ Phone: _____

Persons to contact in case of an emergency when the parent cannot be reached:

Name: _____ Relationship/Phone: _____

Name: _____ Relationship/Phone: _____

Name: _____ Relationship/Phone: _____

Name: _____ Relationship/Phone: _____

Family Doctor or Clinic: _____

Address: _____ Phone: _____

***I give consent for the Funplex and personnel to have access to my child's information and records.**

(Parent/Guardian Signature)

(Date)

Child Pick-Up Authorization

Child's Name: _____

The following people are authorized to pick-up the above-named child at any time from the FUNPLEX.

I authorize the FUNPLEX to release my child into the care of the people listed below whenever they come to pick-up.

Authorized Pick-Up Person

Name: _____ **Relation to child:** _____

Address: _____ **Phone:** _____

Name: _____ **Relation to child:** _____

Address: _____ **Phone:** _____

Name: _____ **Relation to child:** _____

Address: _____ **Phone:** _____

Name: _____ **Relation to child:** _____

Address: _____ **Phone:** _____

Name: _____ **Relation to child:** _____

Address: _____ **Phone:** _____

Name: _____ **Relation to child:** _____

Address: _____ **Phone:** _____

I understand that:

For the safety of my child the Authorized Pick-up person must have their I.D. readily available to present to the staff person.

(Parent/Guardian Signature)

(Date)

Tuition Contract

At the time of your child's enrollment, and every August thereafter, you will be asked to sign a tuition agreement. Please sign and return.

Tuition Payment Procedure

Your child's tuition is paid monthly. Payment is due on the 1st of each month and considered late on the 10th. A \$15 fee will be administered on the 10th of the month if there has been no payment. Every week that the payment is not made in full thereafter, an additional \$15 fee will incur.

Child Specific Tuition

Tuition is specific on a child-by-child basis. You are not required to attend all 5 days a week. Exact pricing for a specific number of days can be found in our Parent Handbook.

My child will be attending _____ days a week.

The monthly tuition will be \$_____.

Program

My child _____ is enrolled in the Funplex ASAP/FunCare (circle) program.

* I need a special payment plan designed to pay my full monthly payment broken into two payments due on the 1st and 15th of the month. _____ Yes _____ No (please check one).

If I fail to provide payment upon due date without prior proper notice and approval by the appropriate staff personnel, I willingly am surrendering my child's enrollment position in their current program and am immediately at risk of being removed from the program.

I have read the regulations regarding Tuition Payment Procedures and agree to abide by them.

(Parent/Guardian Signature)

(Date)

(Parent/Guardian Signature)

(Date)

(Director)

(Date)

Authorization For Prescription and Non-Prescription Medication

No medication shall be given by childcare personnel without the signed permission of the parent or legal guardian. All medication must be in the original container with the child's name, name of the physician, medication name, and medication directions written on the label.

Non-prescription medication brought in by the parent or legal guardian can only be dispensed if there is written authorization from the parent or legal guardian to do so.

Medication which has expired or is no longer being administered shall be returned to the parent or legal guardian.

Child's Name: _____ Age: _____

1. Medication Name: _____
 Amount to be given: _____
 Time to be given: _____

2. Medication Name: _____
 Amount to be given: _____
 Time to be given: _____

Record of Medications Given:

1. Medication Name: _____

Date & Time	Amount	Employee
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Medication Name: _____

Date & Time	Amount	Employee
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

This authorization form must be maintained and is only valid for the duration of prescription.

I hereby give permission to dispense the medication(s) listed above in accordance with the written directions on the prescription label or printed manufacturer's label.

 Parent/Guardian Signature

 Date