

**Dr. Ronald Masera**  
Superintendent of Schools

## ***Clayton Huey Elementary School***

*"A Great Place for All Children to Learn and Grow"*

511 Main Street  
Center Moriches, New York 11934  
(631) 878-9780  
FAX: (631) 878-0238  
[www.cmschools.org](http://www.cmschools.org)

**Dennis Ricci**  
Principal

**Daniella Jackson**  
Assistant Principal

August 2021

Dear Parents/Guardians:

I hope everyone is enjoying their summer! The Center Moriches School District is pleased to announce the continuation of the before and after school care program. **CHAMP** will serve the Center Moriches community and is located in Clayton Huey Elementary School.

The CHAMP program will begin as follows: **A.M.- Friday, September 10, 2021 - 7:15 a.m.**

**P.M.- Thursday, September 9, 2021- 3:15-5:30 p.m.**

"Homework Help" will continue to be part of our daily routine as students will have time set aside to work on their homework assignments. Students will be permitted to play outdoors, weather permitting, and will have opportunities to also play in the gym, go to the computer room and, of course, play table-top games in the cafeteria. Prepackaged healthy snacks are offered at the beginning of the afternoon session for all children to enjoy. Breakfast is still available to students attending the morning program at the cost of **\$1.50** per meal. Please note that all students arriving after 8:40 a.m. must be signed-in by the main office and will be brought to the cafeteria by staff members.

The charge for the a.m. program is **\$10.50** and the p.m. session will be **\$16.00**. There is a 50% discount for the second child and the third (and all additional siblings) are free.

All payments can be made online, please see the Link on our Clayton Huey Homepage or by check/money order made payable to the *Center Moriches U.F.S.D.* All efforts should be made to pay either weekly or monthly and credit will be given to children with lengthy absences due to illness or injury. You will be notified of the total amount owed at the start of each month.

All children must be picked up **by 5:30 p.m.** If, due to an *emergency*, you are not able to be here by 5:30, **please call 631-831-3864** (this cell phone for late pick-up calls **ONLY!** All other calls to the CHAMP director must be made to the Elementary School Main Office.)

If you are interested in participating in the CHAMP program, please complete the attached application and return it to Clayton Huey Elementary School by the first day of school. Payments can be made during drop-off or pick-up hours. If you should have any questions or concerns, please call the Main Office at (631) 878-9780 Ext. 121 or 122.

**IMPORTANT- PLEASE NOTE:**

- **IN THE EVENT OF A DELAYED OPENING- A.M. CHAMP IS CANCELLED. Be sure to have an alternative arrangement for your child(ren) in the event of a delayed opening during the school year.**
- **IN THE EVENT OF AN EARLY DISMISSAL (weather or emergency closing) – P.M. CHAMP IS CANCELLED. Be sure to have alternative after school care arranged for your child(ren) in the event an early dismissal occurs during the school year. A note must be sent to the student's teacher indicating dismissal arrangements in such instance.**
- **In the event your child(ren) is/are not going to attend CHAMP on a day s/he usually attend(s), a note must be sent to the classroom teacher(s) in the morning. Phone call changes to dismissal will not be accepted after 1:45 p.m.**

It is important for parents to realize that attendance is taken at CHAMP before busses are dismissed from the bus loop. **CHAMP and main office staff must have accurate dismissal information for each student before dismissal** and this information must be distributed to staff by 1:45 p.m. Please send notes to ALL teachers if you have more than one child that attends CHAMP – each teacher is responsible for dismissing their students each day – teachers do NOT share dismissal information between siblings. Every student needs his/her own note to make a dismissal change for that day.

- There will be CHAMP (for students who regularly attend) for all half-days of school.
  - There is **NO CHAMP** on the **last day** of school.

Keep this checklist for your records:

**Director: Mrs. Amie Fedak**

\_\_\_\_\_ CHAMP registration form submitted to the Elementary School.

\_\_\_\_\_ A letter indicating which days to dismiss my child(ren) to CHAMP was sent to the classroom teacher(s).

\_\_\_\_\_ Changes to dismissal (i.e., taking the bus and NOT attending CHAMP) - must be done in writing or called-in to the Main Office BEFORE 2:15p.m.

**Phone Number to contact CHAMP personnel (during CHAMP hours ONLY:  
3:15-5:30 P.M. 631-831-3864)**

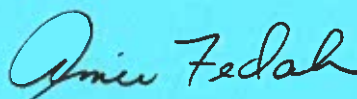
Thank you.

Respectfully,



Dennis Ricci

-and-



Amie Fedak

Principal

Program Director

# Clayton Huey Elementary School

2021-2022 C.H.A.M.P. Registration Form

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

1) Parent/Guardian: \_\_\_\_\_ Phone(H): \_\_\_\_\_ (C): \_\_\_\_\_

2) Parent/Guardian: \_\_\_\_\_ Phone(H): \_\_\_\_\_ (C): \_\_\_\_\_

Address: \_\_\_\_\_ Additional Phone/Contact info: \_\_\_\_\_

### My child may be released from CHAMP to:

1. \_\_\_\_\_

Name

Phone Number

Relationship

2. \_\_\_\_\_

Name

Phone Number

Relationship

In the event that there is an early dismissal and we are unable to reach you by telephone (no telephone service to call you - no way to contact parent - severe weather emergency, etc.), my child will be dismissed as follows at dismissal since there will NOT be CHAMP due to the emergency situation:

\_\_\_ Take the bus home - there will be an adult at the bus stop.

\_\_\_ Take the bus home with \_\_\_\_\_ (Name of another student or classmate).

\_\_\_ Be dismissed at Brookfield to be picked-up by parent or emergency contact designee (per student demographic form).

In case of an accident or serious illness, I request the school personnel to contact me. If the school is unable to reach me, I hereby authorize the school to call the physician indicated below and to follow his/her instructions. If it is not possible to contact this physician, the school may make whatever arrangements seem necessary. Please list any special medical conditions: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### A.M. PROGRAM (Before School 7:15-9 am)- Arrival in rear- Cafeteria Doors

The first day my child will be attending A.M. CHAMP will be: \_\_\_\_\_.

Monday       Tuesday       Wednesday       Thursday       Friday

### P.M. PROGRAM (3:15-5:30pm)- Front of Building- Doors in corner of bus loop area

The first day my child will be attending P.M. CHAMP will be on:

\_\_\_ Thursday, September 9th - or - 1st day attending on: \_\_\_\_\_.

Please check the boxes below of the days your child will be attending regularly. Please write a note to your child's classroom teacher stating days student should be dismissed to CHAMP as well.

Monday       Tuesday       Wednesday       Thursday       Friday

## POLYMER LETTERS EDITION

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