

# HES EDP Parent Information 2025-2026

- EDP is for students in grades K-5 that are enrolled at HES.
- All parents sign up for “REMIND” text. This is how the school will communicate any urgent EDP changes with you. Please put this phone number in your contacts and label it EDP. See directions attached.
- All of the Henry County Code of Conduct and the HES Student Handbook will be applicable at EDP.

## Specific EDP Rules:

- No running around or in-between swings.
- No touching, picking up, or throwing rocks, wood chips, or sand.
- Shoes are to be worn at all times.
- Kindergarten students are not allowed on top of climbing bars.
- Electronic devices- usage will NOT be permitted. HES has no “Hot Spots” for students to use electronic devices.
- Student may not bring toys, games, etc. from home to play with at EDP.
- Being respectful, responsible and resourceful is necessary at all times.

## Consequences for not following the rules:

- Verbal warning
- Time out
- Walk the fence
- Call parent, and sit out until parent arrives
- **\*If the behavior continues to be disruptive, the student will be removed from EDP\***
  - o **Removal from EDP will terminate the ability to attend EDP through the end of 5<sup>th</sup> grade.**
- *Level 2 and 3 offenses will result in an immediate call to the administrator and the parent. The student will receive a behavior referral to the office and immediate removal from the program. (See Henry County Code of Conduct for the list of Level 2 and 3 offenses.)*

## Daily Schedule:

**2:45-3:05 Lunchroom:** Snack and bathroom

**3:05-5:30 Playground/Lunchroom** Please enter the lunchroom from Peachtree Street. Walk up the sidewalk by the dumpster to access the door.

**Snack:** Daily students will be provided a snack daily.

## Payment

Payments will be accepted **ONLY in the office**. You may send the payment in an envelope labeled EDP with your child to school. All payments are due by the designated dates listed below. You will NOT receive weekly/monthly statements concerning EDP payments. It is YOUR responsibility to keep up with your child’s balance and keep it paid in FULL at all times. Failure to keep up with payment will result in removal from the program. The max you will be charged for one week is \$40, two or more days per week of EDP is considered full time. Drop In, at \$25 is only for one day per week. \*To make credit card payments, please call HES at 585-7080. A \$3.00 processing fee will be added to each transaction.

Full Time (per child)	Payment Due Dates	Savings	Drop In (per child)	Payment Options
Weekly-\$40	Due <b>MONDAY</b> of each week			Cash    Check *Credit Card
Registration Fee-\$25 (separate check/cash)			Registration Fee-\$25 (separate check/cash)	

# HES Extended Day Program 3:00-5:30 Daily Grades K-5

## Registration Form 2025-2026

Scan & Email this form to [hasedp@henrycountyboe.org](mailto:hasedp@henrycountyboe.org) or drop it off at HES office

**List all children in your family in grades K-5 who will attend EDP**

First & Last Student Name	Grade	Homeroom Teacher	Medical Issues	If Yes please explain (may use back)
			Yes No	
			Yes No	
			Yes No	
			Yes No	

**Are your children covered by insurance? Yes No**

**Who is your children's primary doctor? \_\_\_\_\_ Phone \_\_\_\_\_**

**Do we have permission to seek medical treatment if we are unable to reach either parent? Yes No**

**Primary Contact \_\_\_\_\_ Phone \_\_\_\_\_**

**List contact numbers you would like to be used in the order you want them called.**

Contact Name	Relation to Student	Phone Number

**List all people who have permission to pick-up your child/children. Including parents, step-parents, etc. Your child will not be released to anyone unless their name is on this list. All adults listed need to be prepared to show their ID to the EDP teachers.**

Adult's First & Last Name	Relation to Student

**I agree to and plan to follow the payment schedule attached.**

**I plan to utilize the \_\_\_\_ Weekly (\$40)**

**Call HES to make credit card payments at 585-7080. A \$3.00 processing fee will be added to each transaction.**

**I have read and understand the EDP policies and procedures.**

**Parent Signature \_\_\_\_\_ Date \_\_\_\_\_**

-----Office Use Only-----

**\$25.00 registration fee per child \_\_\_\_ Cash \_\_\_\_ Check \_\_\_\_ Credit Card Date paid \_\_\_\_\_**