



## New Program!



# PRESTON CENTER OF COMPASSION AFTER-SCHOOL RECREATIONAL PROGRAM!

Open Enrollment  
For Girls and Boys Grades 1<sup>st</sup> - 6<sup>th</sup>  
Everyday\* Monday-Friday  
3:00pm – 6:00pm



- ❖ The After-School Recreational Program offers a safe and fun environment for children who need a place to go after school.
- ❖ Activities are designed to be fun and encourage social interactions.
- ❖ We offer free transportation\*\* to the program from select local Throggs Neck schools.
- ❖ Every day begins with **Independent** homework time and snack, followed by many engaging activities.

To register or learn more information about our program please call PCC at **718-892-8977**.



\*Every day that school is in session  
\*\*Offered when registered for at least 3 days a week

**Various Activities  
Every Week**

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**Independent  
Homework Time**

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**Snacks Provided**

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**Gaga Ball**

**Computer Lab**

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**Board Games**

**Arts and Crafts**

**And more!**

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**Safe and Fun for  
Everyone!**

**PRESTON CENTER OF  
COMPASSION**  
2780 Schurz Ave Bronx, NY  
10465  
  
(718) 892-8977  
  
[www.prestoncenterofcompassion.org](http://www.prestoncenterofcompassion.org)

**After-School Recreational Program Registration form**  
**Complete and return with \$100 registration Fee plus tuition**

To register for the After-school Recreational Program, please check the sessions you want to enroll your child in:

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday

<b>Tuition for this program is \$240 a month plus a \$100 registration fee</b>
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Snacks are included in all programs!

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_. Grade: \_\_\_\_\_

Does your child have an IEP? Yes \_\_\_\_\_ No \_\_\_\_\_

Parents' Names: \_\_\_\_\_

Mom's cell: \_\_\_\_\_

Dad's cell: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mom's Work Phone: \_\_\_\_\_

Dad's Work Phone: \_\_\_\_\_

Emergency #: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Please return this registration form with full payment to secure your child's place in the program.

Mail to:  
Preston Center of Compassion  
2780 Schurz Ave., Bronx, NY 10465  
Attention: After School Programs  
(Make checks payable to Preston Center of Compassion)

My child has permission to participate in the Afterschool Recreational Program. In case of an emergency, I can be reached at the phone number(s) listed above. I agree to allow Preston Center of Compassion to use any photographic image of my child taken at the PCC tutoring programs. These images may be used in promotions, newspaper articles, brochures, newsletters, or other related materials.

Parent's Signature: \_\_\_\_\_

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