

Early Irish

St. Mary's Before School Program

We are excited to offer **Early Irish**, St. Mary's before-school program, to provide a safe, supervised environment for students before the start of the school day.

Program Hours

- **Regular School Days:** Monday–Friday (when school is in session), **7:45–8:30 a.m.**
- **Two-Hour Delay Days:**
 - Program begins at **9:45 a.m.** at the regular daily rate.
 - Students may arrive as early as **8:45 a.m.** for an additional fee.

Location: Small Gym

Drop-Off Entrance:

Please enter through the **Marion Street entrance**, located just off the alley on Marion Street.

Fees:

Regular School Days

- **\$5 per day**
- **Sibling Discount:** \$4 per student, per day

Two-Hour Delay Days

- Arrivals **between 8:45 and 9:45 a.m.:**
 - **\$10 per student**
 - **\$8 per student** with the sibling discount
- Arrivals **at 9:45 a.m. or later:** Regular daily rates apply.

Early Irish Before School Program

Parent Permission & Student Agreement

2026–2027 School Year

Parent/Guardian Permission

I, _____ (Parent/Guardian Name), give permission for
_____ (Student Name) to participate in the **Early Irish
Before School Program** at **St. Mary's Catholic School**, located at **311 Marion Street, Marietta,
Ohio**.

By signing below, I acknowledge and agree that:

- I have read and understand the Early Irish program information and fee schedule.
- I agree to pay all program fees either **in advance or on the day my child attends**.
- Space is limited to **24 students** each day. If the program reaches capacity, students who have paid in advance will receive priority placement.

Parent/Guardian Signature: _____ Date: _____

Phone Number: _____

Student Behavior Agreement

I, _____ (Student Name), understand that I am expected to demonstrate respectful, responsible, and Christ-like behavior while attending the Early Irish Before School Program.

I agree to:

- Treat teachers and fellow students with kindness and respect.
- Follow all school and program rules.
- Use equipment and materials responsibly.
- Help create a safe and welcoming environment for everyone.

I understand that failure to follow these expectations may result in my removal from the program. If this occurs, my parent/guardian understands that program fees will **not** be refunded.

Student Signature: _____ Date: _____

Parent/Guardian Initials: _____

"Let all that you do be done in love."
— 1 Corinthians 16:14