

CHILDRENS NAMES:



Deane

Doral

Slater

Thomson

## Before/After Tuition

	<u>MONDAY</u>	<u>TUESDAY</u>	<u>WEDNESDAY</u>	<u>THURSDAY</u>	<u>FRIDAY</u>
WEEK OF: 1/3 <b>Happy Holidays All Programs Closed 12/24-12/31</b>	Jan 3 <b>Full DAY</b>	Jan 4 <b>Full DAY</b>	Jan 5 Before: After:	Jan 6 Before: After:	Jan 7 Before: After:
WEEK OF: 1/10	Jan 10 Before: After After:	Jan 11 Before: After:	Jan 12 Before: After:	Jan 13 Before: After:	Jan 14 Before: After:
WEEK OF: 1/17	Jan 17 <b>All Programs CLOSED</b>	Jan 18 Before: After:	Jan 19 Before: After:	Jan 20 Before: After:	Jan 21 Before: After:
WEEK OF: 1/24	Jan 24 Before: After:	Jan 25 Before: After:	Jan 26 Before: After:	Jan 27 Before: After:	Jan 28 Before: After:

### STEPS FOR CARE CALCULATION:

1. Enter 1 next to the before/after sessions you will need care. '0' means NO CARE; '1' means NEED CARE.
2. Confirm number of Before and After School sessions are correct below. Add number of children and confirm/add total.
3. Payment must accompany calendar to reserve spot. Reduced tuition rate only given once proof of F/R status through school.
4. Limited space available. **Payment is due by the Wednesday of the prior week**, however we do encourage earlier payments to secure a spot. Calendars are also required for CCAP families to reserve their space.
5. For Safety and tracking purposes, please inform Director of any care schedule changes. NO refunds or credits for unused care.

### DUES CALCULATION:

Before Care Sessions: \_\_\_\_\_ X

After Care Sessions: \_\_\_\_\_ X

Full day Care Sessions: \_\_\_\_\_ X

Before:

After:

\*Must provide proof of Free/Reduced qualification to select \$1/session reduced tuition rate. Must be manually chosen- Standard rate is automatically selected.

Subtotal:

X Number of Children=

2nd child discount  
(if applicable. Must be taken manually)

**TOTAL DUE:**

**\*\*Spots reserved \$5/session (\$10/full day) drop-in fee applies to all payments/schedules not received by Wednesday for upcoming week.**



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