

CHILDRENS NAMES:



Before/After Tuition

	<u>MONDAY</u>	<u>TUESDAY</u>	<u>WEDNESDAY</u>	<u>THURSDAY</u>	<u>FRIDAY</u>
WEEK OF: 9/6	Sept 06 NO PROGRAM	Sept 07 Before: After:	Sept 8 Before: After:	Sept 9 Before: After:	Sept 10 Before: After:
WEEK OF: 9/13	Sept 13 Before: After:	Sept 14 Before: After:	Sept 15 Before: After:	Sept 16 Before: After:	Sept 17 Before: After:
WEEK OF: 9/20	Sept 20 Before: After:	Sept 21 Before: After:	Sept 22 Before: After:	Sept 23 Before: After:	Sept 24 Before: After:
WEEK OF: 9/27	Sept 27 Before: After:	Sept 28 Before: After:	Sept 29 Before: After:	Sept 30 Before: After:	Oct 1 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:

Subtotal:

X Number of Children=

TOTAL DUE:

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

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

