

# Saint Timothy Middle School

www.stmswh.org

## AFTERCARE ENROLLMENT FORM

SCHOOL YEAR: 2011-2012

In the selection of enrollment dates and times for St. Timothy Middle School Aftercare Program, you are asked to check the box (es) next to the appropriate day(s) as needed, fill in your child's name, sign and date this form. Amounts listed are annual charges. Please note that the selections are for scheduled days on the school calendar and do not include any vacation or holiday periods. **There is no Aftercare on days with noon dismissal or full days that precede a vacation period.** Rates are per child and no credit is issued for early release days or missed days due to inclement weather. The late charge for children scheduled in the program that remain in Aftercare past 5:05pm will be \$35.00 for the first quarter hour and \$15.00 each additional quarter hour or any part after the first quarter hour. **Timely pick-up is critical to the After-Care Program and the late policy will be strictly enforced.** (For example: 5:05-5:20pm pickup will result in a \$35.00 late fee and an additional \$15.00 charged at 5:35pm, 5:50pm, etc.)

Also, Aftercare is available on a per diem basis. The per diem charge of \$20.00 is invoiced at the end of each month. **Just send a note to the office requesting this service or call in the morning of the day your child will attend After-Care.**

After-Care is also available before or after a school sport or school club meeting/activity. **The charge for this After-Care Service is \$5.00 per day and the student MUST have a parent note informing the school office that their child will be attending After-Care due to a sport or club activity; otherwise the per diem rate of \$20 will be charged.**

To facilitate the operation of the program, this signed document will serve as the agreement between the school and the parent/guardian(s) with the same conditions stated within the Tuition & Fees Payment Agreement. It shall become an addendum to the family's Tuition & Fees Payment Agreement. Payment will be assigned to the family as the same method chosen on their Tuition & Fees Payment Agreement.

EACH CHILD REQUIRES A SEPARATE FORM.

Child's Name: \_\_\_\_\_ Grade \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Select	Day	Annual Fee
<input type="checkbox"/>	Monday (2:45-5:00pm)	\$355
<input type="checkbox"/>	Tuesday (2:45-5:00pm)	\$355
<input type="checkbox"/>	Wednesday (1:30-5:00pm)	\$355
<input type="checkbox"/>	Thursday (2:45-5:00pm)	\$355
<input type="checkbox"/>	Friday (2:45-5:00pm)	\$355
ANNUAL TOTAL:		\$1,775.00

Parent/Guardian Acceptance:

\_\_\_\_\_  
Parent/Guardian Signature Date: \_\_\_\_\_

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

Acct. No. \_\_\_\_\_

Billing Cycle: \_\_\_\_\_

Total Cost: \_\_\_\_\_

Payment Amount: \_\_\_\_\_