

#A3 - After School Care Agreement

School: Community Christian Academy
Year: 2020-2021

I, _____, the legal parent/guardian of the child(ren) listed below, do desire to enroll said child(ren) in the Community Christian Academy After School Program for the 2020-2021 school year. I understand that this program will provide a structured learning and recreational program for the hours of 3:00pm (EST) until 6:00pm (EST), Monday through Friday.

Fees

The fee for this service is \$6 per hour for fifteen (15) hours per week, and is billed monthly at \$360 per month, per child. There shall be no credits or refunds for any days missed by any child(ren).

Discount

For a second child, there is a 10% discount of \$36.

Drop-In Hourly Fee

If you desire to use this program for less than three hours per day, you may pay at the rate of \$9 per hour and will be billed and payable each Monday morning.

Late Fee

I understand that, if I pick up my child(ren) after 6:00pm (EST), there will be a \$15 Late Pickup Fee that is due and payable upon pickup.

Withdrawal

To withdraw any child(ren) from the After-School Program, you must provide CCA with a two-week written notice.

Children to be Enrolled:

Signed: _____ Date: ____/____/____
(Parent/Guardian)

Your relation to the child: _____

Parent/Guardian Daytime Phone Number: _____
Phone Type: Mobile Home Work

Please call me before administering any medication. YES NO