

# Extended Care Information Form Christ The King & St. Pius Tenth for the 2010-2011 School Year

*All information must be completed by the financially responsible person (parent / legal guardian)*

Make checks payable to the Monroe County Catholic Schools. **Registration fees are not refundable.**

The parent / legal guardian must complete the registration information below and submit it with a \$40 registration fee.

Parent / Legal Guardian Name \_\_\_\_\_ Billing Account \_\_\_\_\_

Mailing Address \_\_\_\_\_

*Street*

*City/Town*

*Zip*

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

**UNDERSTANDING and AGREEMENT:**

1. I have been provided a copy of the Monroe County Catholic Schools TUITION & EXTENDED CARE COLLECTION POLICIES AND PROCEDURES and understand it contents.
2. **I understand that the cost of extended care will follow the same payment option chosen for tuition payments (e.g. check, direct debit or credit card).**
3. Families may begin, drop-out or purchase drop-ins once a month. Signed form must be (no exceptions) in Finance Office on the first day of the month. This will allow time to process adjustments prior to monthly statements.
4. There will not be any prorated discounts for beginning and ending participation mid-month.
5. I agree to pay a \$20 late fee, which will be assessed after the due date.
6. Finance will post payments to the oldest open invoice whether or not it is tuition, extended care or a fee.
7. First point of contact for questions or concerns should be the program director and/or school principal.

Signature(Parent/Legal Guardian) \_\_\_\_\_

Relationship to student(s) *Must be parent or legal guardian* \_\_\_\_\_

**In addition to the monthly rate, a \$1 per minute fee will be applied for late pickup of your child(ren) per on site clock.**

**Indicate your choice(s) below:**

BEFORE SCHOOL CARE							
Child Name	3 Days Per Week \$50 a month per child					5 Days Per Week \$100 a month per child	Date of Withdrawal
	M	T	W	TH	F		

AFTER SCHOOLCARE							
Child Name	3 Days Per Week \$120 a month per child					5 Days Per Week \$200 a month per child	Date of Withdrawal
	M	T	W	TH	F		

**DROP-IN CARE - Each child requires an admittance slip each time they attend.**

Cost is \$125 for 10 days.

The Finance office will forward the admittance slips to the family when billed.  
The school will collect the admittance slip when your child attends.

====> You must let the coordinator know in advance of when you plan to send your child, so that staffing can be scheduled.  
Additional admittance slips can be purchased according to the understanding above.

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

When withdrawing from 3 or 5 day program -- Parent must sign and date here and return form to Extended Care Coordinator.  
The Extended Care Coordinator will sign and date and forward this form to Finance Office, keeping a copy for their records.

Extended Care Coordinator Signature: \_\_\_\_\_ Date \_\_\_\_\_