

Before & After Care Programs

Student Last Name:							
DOB:	Age:		Grade: Cla		oom:		
The before and after car with peers. It is an excel energy, and have time to	ent time fo	r children to					
Before Scho	ol (After Schoo		After School	Full Day Extended]
Program		Program 1 h		rogram 2 hr		Program	
7:20 – 8:20 AN		3:40 – 4:40 PM		:40 – 5:40 PM	7:20 – 5:40 PM		
\$150/month o	r ;	\$150/month c \$15/day**	or \$3	\$250/month or		\$350/month or	
\$15/day**	.5/day**			\$20/day**		\$35/day**	
Approximate Drop-Off Time:			Approximate	Pick-Up Time:		_	
I would like my child to go dir	ectly from th	e classroom to	the After School F	rogram on: (Please	check)		
			Wednesdays		Fridays	As Ne	eded
We encourage you Each after school	_	•				n	
All children who have not notice if you would like yo to wait outside on a day th	ur child to g	o directly to t					
Tuition Payments: **You (7th) usage of any extende Sept 1st to June 1st. Billing Multiple siblings in the Ex Preschool students enroll reduced by 50% (from \$33 Program more than 6 days Late Pick-Up Fee: San Tan billed until your child is pice.	d school progra is sent by ema tended School ed in a 5 day/fi to per month t per month. Montessori is	am, you will be dr will on the 1st of the programs will recould day program and the so \$175). This is o	narged the full mont he month after serv ceive a 10% deducti as well as monthly only valid when the	hly rate listed above. T ices are rendered, due on in tuition Full Day Extended Scho student is 5-day full d	the extended sch on the 11th of t ool, the extended ay preschool and	ool program is b he month. d school progra d using Full Day	oilled from tims will be r Extended
Upon signing, I ha	ve read the En	rollment Agreen	ent and agree to a	bide by the policies, be	oth financial and	otherwise.	
Signature of Parent (Mother) or Gua	rdian	Signature of Par	ent (Father) or Guard	an .	Date		