

## **BEFORE & AFTER CARE PROGRAMS**

PROVIDED BY SAN TAN MONTESSORI, LLC

All students (PreK – 12) who have not been picked up at their designated dismissal time from class/clubs/sports will be signed into the after school program and will be charged accordingly. An authorized adult, 18 years or older, must sign the student out.

Student First Name:			Last Name:						
DOB:		Age:	Grad	e:	Teacher (if known):				
	eceiving c	ontinuity of	care betweer	the hours of	7:00 AM and	d 5:40 PM.	Students	ience knowing their enjoy a family like	
Befo	Before School		After School		After Sc	After School		Full Day Extended	
Program (AM)			Program (PM-1)			Program (PM-2)		Program (PM-3)	
	7:00 – 8:30 AM		3:30 – 4:30 PM		3:30 – 5:40 PM		7:00 – 8:30 AM & 3:30 – 5:40 PM		
\$150/month or		r	\$150/month or		\$250/mo	\$250/month or		\$350/month or	
\$1	\$15/day**		\$15/day	\$15/day**		\$25/day**		\$35/day**	
I would like i	my child t	to join the a	after care pr	ogram follov	ving dismiss	al on thes	e days:		
	Monday		Tuesday	uesday Wednesday			Thursday	Friday	
The primary people picking up my Full Name (Parent/Guardian)			-	child are: Phone Number		Email Address		<u> </u>	
T dii Ndiile (i	arenty da		THORE	- Tumber			an / taar ess		
In case of an	o morgo	may the fel	lowing noon	lo aro autho	rized to pick	vun my ch	ild from t	ho after care program	
n case of an emergency, the foll Minimum of 2 Full Name		lowing peop	willig people are authorize		Phone Number		Relationship		
1. requ	iired								
2. requ	iired								
3. optio	onal								
4. optio	onal								
Health Infor	mation Pi	ease provide	e any medical	or allergy inf	ormation for	your child.			



## **BEFORE & AFTER CARE PROGRAM**

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Student First Name:	Last Name:				
10% Discount provided to families with siblings a	also using the program and military far	milies. (Check below)			
□ Provide Siblings Name and Grade	☐ Military Family	•			
Sibling Full Name:		e:			
Sibling Full Name:		e:			
Sibling Full Name:		e:			
Sibling Full Name:		e:			
<ul> <li>Tuition Payments **You will be charged in a month. On the tenth (10th) usage of listed above. Billing is sent by email on the charged on the 15<sup>th</sup> of the month.</li> <li>Multiple siblings in the Before and After</li> <li>Preschool students enrolled in a 5 day/fu extended school programs will be reduce student is 5-day full day preschool and us</li> <li>Late Pick-Up Fee San Tan's Before and After \$1.00 per minute for each additional min</li> <li>Failure to Pay: Payments not received by thereafter of non-payment will incur and the aforementioned tuition and fees as so non-payment of any funds due hereunded and to exclude the child from participation collection agency. In the event that it be agency and/or attorney for collection of costs and expenses incurred by San Tan Milmited to all postage fees, attorney fees, accounts will be sent to a company or law still delinquent at the end of the second relationship of the second r</li></ul>	any extended school program, you wine 5 <sup>th</sup> of the month after services are record as programs will receive a 10% dedull day program as well as monthly Fulled by 50% (from \$350 per month to \$1 sing Full Day Extended Program more to five Care program is open from 7:00 and the is billed until your child is picked by the 15 <sup>th</sup> day will incur a \$15 non-refundational 5% fee of the original amount appecified, time being of the essence with the instruction, and unpaid amount comes necessary for San Tan Montess any amounts due under this agreemer Montessori, LLC., whether or not litigate, and court costs incurred by San Tan Montess any employed by the school for collect month the student use of the program arrs or older, is required to sign my students are or older, is required to sign my students.	Il be charged the full monthly rate endered, the card on file will be uction in tuition.  I Day Extended School, the 75). This is only valid when the than 9 days per month.  Im - 5:40 pm. Beginning at 5:41 pm, up.  Indable late fee. Every 15 days at due. The Parent agrees to pay ith respect thereto. In the event of the right to cancel this agreement ants could result in being sent to a ori, LLC. to employ a collection at, parent agrees to pay all the tion is initiated, including, but not Montessori, LLC. Delinquent ctions management. If payment is may be suspended.			
and otherwise.		ic by the ponoics, some manera.			
Signature of Parent (Mother) or Guardian	Signature of Parent (Father) or Guardian	Date			
For Office Use Only: ☐ RECEIVED BY PRESCHOOL	□ PROGRAM CHOSEN	☐ 10% SIBLING/MILITARY DISC			
Date & Initials of Received	Start Date	Year Entering 2022-2023			
☐ AUTHORIZED PEOPLE ☐ HEALTH INFO ☐ PAYI	MENT INFO □ SIGN IN/OUT SHEET □ S	TAFF ROSTER			