

2016-17 After Care Enrollment Form

After Care is on-campus, after-school care during the school year and is available for Pre-Kindergarten through 8th grade students. After Care fees include snacks and materials. Service is provided from dismissal until 6:00 p.m. on regular SCS school days. At this time there is no service provided for half-days and days in which school is not in session. If your child is not picked up by 6:00 p.m., there will be a late fee of \$5.00 for every five minutes. All students must have this enrollment form filled out and on file prior to attending after care.

Please complete the information below as soon as possible due to limited space. This program will be filled on a first come/first serve basis. Once your child is enrolled, you will make payments according to the method of payment chosen.

Student Name		Grade	Birthday	/_	/
Allergies/Medical Conditions					
Student Name		Grade	Birthday	/	/
Allergies/Medical Conditions					
Parent Name	Home #		_ Cell #		
Address	CITY	STATE		ZIP	
E-mail					
Another contact person	Hom	e#	Cell # _		
Who is permitted to pick-up student(s)?					
Choose one of the following payment plans Option A: \$2,210 per student per yea cash/check payment in credit card payment in automatic monthly bar	ear (5 days/week cash n full <i>(cash rate applies</i> full <i>(additional 2.75</i> %) credit card fee			
Option B: \$5 per 15-minutes (\$15 p	er day max.) billed m	onthly through	n FACTS.		
Signature of Parent/Guardian Pr	rinted Name		Date		

For Office Use Only:
__ After Care
__ Business Office
__ Parent