**CHILDRENS NAMES:**

SEPTEMBER 2021



Before/After Tuition

**ATTENDING SCHOOL:**

#  CIRCLE ONE

**School sites:**

**Denison**

**CMS GUST**

**MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY**

## WEEK OF: 9/6

Sept 06

Sept 07 Sept 8

Sept 9 Sept 10

**NO PROGRAM**

Before: -

After: -

Before: -

After: -

Before: -

After: -

Before: -

After: -

## WEEK OF: 9/13

Sept 13 Sept 14

Sept 15 Sept 16

Sept 17

Before: -

Before: -

Before: -

Before: -

Before: -

After: -

**After:** -

**After:** -

**After:** -

**After:** -

## WEEK OF: 9/20

Sept 20

Sept 21 Sept 22

Before:

Sept 23 Sept 24

Before: -

Before: -

**Before:** - -

Before: -

After: -

**After:** -

**After:** -

**After:** -

**After:** -

## Week of 9/27

Sept 27

Sept 28 Sept 29

Before:

Sept 30 Oct 1

-

Before:

Before: -

Before: -

- **Before:** -

1/2 day: -

**After:** -

**After:** -

After: -

**After:** -

## STEPS FOR CARE CALCULATION:

1. **Enter 1 next to the before/after sessions you will need care. '0' means NO CARE; '1' means NEED CARE.**
2. **Confirm number of Before and After School sessions are correct below. Add number of children and confirm/add total.**
3. **Payment must accompany calendar to reserve spot. Reduced tuition rate only given once proof of F/R status through school.**
4. **Limited space available. Payment is due by the Wednesday of the prior week, however we do encourage earlier payments to secure a spot. Calendars are also required for CCAP families to reserve their space.**
5. **For Safety and tracking purposes, please inform Director of any care schedule changes. NO refunds or credits for unused care.**

## DUES CALCULATION:

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  | **Before Care Sessions:**  **X** | $ 15 | **1/2 day:** |  | **X** | $ 25 |
|  |  |  |  |  |  |  |
|  | **After Care Sessions:**  **X** $ 15 | $  |  |  |  |

**A**

Full day Care Sessions:

**X** $ 45

# $

Before:

# $

$

Subtotal:

**After:**

# $

$

\*Must provide proof of Free/Reduced qualification to select $1/session reduced tuition rate. Must be manually chosen- Standard rate is automatically selected.

X Number of Children=

**TOTAL DUE:**

# $

$5/session ($10/full day) drop-in fee applies to all payments/schedules not received by Wednesday for upcoming week.

\*\*Spots reserved

