



ST. JOSEPH CHRISTIAN SCHOOL

EQUIPPING STUDENTS TO IMPACT
THEIR WORLD FOR JESUS CHRIST

SJCS BEFORE/AFTER SCHOOL CARE PROGRAM CONTRACT 2017.18

St. Joseph Christian School offers before and after school care, open to students enrolled in pre-k through sixth grade. Before school care is available each in session school day from 6:45 a.m. to 7:40 a.m. After school care is provided on regular school days from 3:00 p.m. – 5:30 p.m. and on scheduled early dismissal days from 11:50 a.m. – 5:30 p.m. It is **not available** on Grandparents’ Day, the last day of school, or early dismissals due to inclement weather. Space is limited so please return this completed contract right away. **We will email an approved copy of this contract to you to confirm your student’s placement in the program.**

Please email this form to Mrs. Dunlap, dunlapr@stjosephchristian.com or return it to the main office

All before and after care charges will be billed and payable through your online tuition FACTS account. For your convenience, the annual fee for full time contracted care is divided over 10 monthly payments of \$120.00/month for after care and \$80.00/month for before care, due the first of each month, August through May. Students attending three days a week or more are considered full time and no discounts are given for absences. Part-time contracted care **may** be available, depending on enrollment. Contracted part-time care is \$8.00 for regular school days; \$15.00 for early dismissal days. Part-time or emergency before care is \$5.00 per day. Occasional or emergency after care **may** be available but space is limited so this service is not guaranteed and no contract is necessary. Occasional or emergency after care is \$10.00 for regular school days; \$20.00 for early dismissal days. Please refer to the online elementary handbook for complete details of payment policies and procedures.

Parents’ Names: _____

Primary Contact Number: _____ Emergency Contact Number: _____

Primary email address: _____

Enrolling for: Full time before care Full time after care
 Part-time before care Part-time after care

If using part-time after care, please check the day(s) below your student(s) will likely be attending. (We realize this may change.)

Monday Tuesday Wednesday Thursday Friday Early dismissals

Student name: _____ 2017-2018 Grade: _____

Student name: _____ 2017-2018 Grade: _____

Student name: _____ 2017-2018 Grade: _____

By enrolling the student(s) listed above in before/afterschool care, I acknowledge that I have read and understand the program policies and procedures as presented in the elementary handbook. I agree to pay the prices outlined above, as well as any late fees that may be assessed to my account for overdue payments or late pick-ups. I understand if my account becomes 30 days past due, the school may terminate our participation in the program. If my student is withdrawn from school at any point during the year, I agree to pay the “pro rata” portion of the current month’s payment, as well as any past due amounts including late charges. If I am unable to meet the terms set forth in this contract, or if our need for before/aftercare changes, I will contact the school as soon as possible.

Parent Signature/date

Parent signature/date

For Office Use Only

Date received: _____

Approved by: _____

Confirmation sent: _____