



Before and After Care Contract

Student: _____

The Before Care hours are 7:15-8:30am. The After Care Hours are 3:00-5:30.

Days and Hours reserved for your Student

	Monday	Tuesday	Wednesday	Thursday	Friday
Hours Before Care					
Hours After Care					
Charges BC \$4 AC \$5 Both \$8					

I, _____, have read and understand the above contract as written.
I agree to its terms and acknowledge my responsibility for payment for this care.

Parent/Guardian: _____ Date: _____

- *Reserved places are under contract for the year
- *Monthly charge will be based on the school calendar schedule
- *Monthly statement will reflect that months charge
- *Charges are fixed whether student is here or not
- *If you student will not be here, out of respect let the office know incase another student needs the place