



# 2019 Summer Care Registration



Child's Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

M D Y

Current Age: \_\_\_\_\_ Parent's Name( s): \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

Address: \_\_\_\_\_

### 8 week program: June 3 - August 2

Available Classes: 9:00am - 2:00pm

*COST is monthly which will equal 2 months.*

2 Day- T/TH.....\$183.75

3 Day- M/T/TH.....\$262.50

4 Days-M/T/W/TH.....\$367.50

5 Days- M/T/W/TH/.....\$435.75

#### Check if Applicable

**Sibling Discount: 10% off monthly tuition**

**East Side Members: 10% off monthly tuition**

#### -EARLY & AFTER CARE OPTIONS:

Early Care - 7:30am-9:00am

After Care - 2:00pm-5:30pm

Early & After Care -7:30am-5:30pm

#### EARLY & AFTER CARE PRICES: (total cost for 8 weeks)

Early Care = \$40 2 days/\$50 3 days/\$70 4 days/\$90 5 days  
 After Care = \$60 2 days/\$85 3 days/\$110 4 days/\$135 5 days  
 Total Care for 2 days = \$85 (Early/After)  
 Total Care for 3 days = \$125 (Early/After)  
 Total Care for 4 days = \$165 (Early/After)  
 Total Care for 5 Days = 205 (Early/After)

## REGISTRATION \$50 - per student

**One time \$35.00 supply/activity fee  
To be paid with June tuition**

*Registration fee is **NON-REFUNDABLE**.  
\*Due at time of registration to hold spot\**

Signature \_\_\_\_\_  
(Please sign that you understand the registration fee is non-refundable.)

- The total cost of the 8 weeks of summer care will be divided into two equal monthly payments, due June 11th and July 16th.
- Classes are based on enrollment. If there are not enough students enrolled to make a class, then parents will be notified as soon as possible.
- We are only able to accept cash or checks.
- Sibling Discount: 10% off summer tuition
- ALC will be closed May 27-June 1st to prepare for summer program. We will also be closed July 1-5 and will resume classes on July 8th - August 2nd. August 2nd we will dismiss at 2:00pm and this will be our last day of our summer program so that our teacher have a week to prepare for our fall classes.

\*\*\*\*\*Office Use Only\*\*\*\*\*

Registration Fee \$ \_\_\_\_\_ Paid \_\_\_\_\_ Date: \_\_\_\_\_ Check# \_\_\_\_\_ OR Cash \_\_\_\_\_ Staff Initials \_\_\_\_\_