



**Extended Day Program
School Year 2020-2021**

Annual Contract Fees

	<u>Session: 3:00-6:00pm</u>
5 days per week	\$3,300
4 days per week	\$2,800
3 days per week	\$2,400
2 days per week	\$2,000
1 day per week	\$1,650

A registration form must be completed for all children attending Extended Day. Subsequent changes to a contract schedule must be requested in writing using the appropriate form available from the Extended Day Director. **Contract accounts need to submit a \$210 non-refundable registration fee which will be credited to your account.**

Occasional Use Fees

Late Pick-up fee	\$15.00 per every 10 minutes after 6pm
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Remaining Extended Day fees, after deposit, will be paid through HES.



**Extended Day Program
School Year 2020-2021**

Please send this form back to the business office by August 28, 2020 notifying us:

Yes, please enroll my child (ren) for ____ days per week:

Child's Name: _____

Child's Name: _____

Child's Name: _____

****All contract accounts need to submit a \$210 non-refundable registration fee which will be credited to your account.**

Date received: _____ Check #: _____ Amount: \$ _____

No, we are not interested in enrolling in the Extended Day Program.

We will notify the business office by August 28, 2020 and begin our payment plan on 9/1/20. If we choose to do the monthly option at this time, we acknowledge that it will be spread over 8 monthly payments instead of 10 by selecting this option.

Payment Plan Options

Annual Payment
One payment
Due 9/1/20

Semi-Annual Payment
Two payments. 60% due by
9/1/20 and 40% due by 11/1/20

Monthly Payment*
10 monthly payments
may be made starting
7/1/20. A credit/debit
card must be placed
on file.

*By choosing the monthly option, you are required to submit your credit/debit card information to the business office with this enrollment agreement. Your card will be debited the 1st of every month. You are required to notify the business office if there are any changes to the credit/debit card information provided. By signing below, you authorize The Meadowbrook School to charge the credit card on file:

Credit/Debit Card #: _____

Expiration Date: _____

Billing Zip Code: _____

Card holder's Name (*please print*)

Card holder's Signature