



Fee and Attendance Agreement

School Age Connections

Explorer Academy After-school

Child's/Children's Name: _____

Start Date: _____

DAYS ATTENDING	TUITION AMOUNT
5 days per week	\$165 per month
4 days per week	\$133 per month
3 days per week	\$110 per month
2 days per week	\$75 per month
Daily Drop-In rate	\$12 per day
Early Release ONLY	\$10 per day

DAYS OF THE WEEK	PLEASE CHECK IF ATTENDING
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Early Release days ONLY	

If you receive Link childcare subsidy, please indicate your daily fee: _____ per day.

- I understand that there is a \$15.00 enrollment fee due upon enrollment, as well as a \$10.00 supply fee.
- I understand that if my child attends the program on a day that I have not marked above, I will owe the \$12.00 drop in rate for that day.
- I understand that I should request any schedule changes to the SAC Director, and changes will be accommodated ONLY if space is available in the program.
- I understand that payments are prepaid for the month and are due by the 15th of that month.
- I understand that if my fees become delinquent, a late fee of \$10 per week, per child, will be charged to me.
- I understand that if my fees are not paid in full, I will forfeit my child's space in the center, and a closure notice will be sent giving me two weeks to make payment arrangements.
- I understand that if I do not make arrangements in those two weeks or do not pay on the arrangement, my child will be dis-enrolled effective the said closure date.
- I understand that if my fees are not paid in full by the end of the school year, I cannot enroll or re-enroll my child in another SAC program.
- I understand that with the exception of an emergency, a late pick up fee will be charged to me when my child is picked up after closing time in the amounts that follow:
 - \$5.00 for the first five minutes after closing,
 - \$2.50 for every minute thereafter.

Private Pay Families

- I understand that my monthly and/or daily fee is due whether or not my child is physically present in the program all of the days I have signed up for (due to illness, vacation, snow days, etc.) This payment reserves a space in the program for my child.
- I understand that I am responsible for paying my monthly and/or daily fees in a timely manner and that I am responsible for any other fees that occur, including late fees, the Enrollment fee, the Supply fee, and field trip fees.

Subsidy Families

- I understand that I am responsible for my co-payment and any other fees that need to be paid, including late fees, the Enrollment fee, the Supply fee, field trip fees, and any days/hours not covered by my LINK Certificate.
- I understand that not paying my co-payments on time could result in closure of my Link certificate.

By signing this form, you agree that you have read and understood the Fee and Attendance Agreement.

You understand that payments are due by the 15th of each month and that you are pre-paying for the month.

You understand that you are responsible for all fees that were covered above.

I understand that I owe \$_____ per month / day (Private Pay)

I understand that I owe \$_____ per day (LINK Subsidy)

Signature of Parent or Guardian

Signature of Parent or Guardian

Social Security Number

Social Security Number

Date

Date

Signature of Site Supervisor or SAC Director

Date