



# Before and After School Care Contract 2020-2021

**Hours**

Before School Care 7:00 – 8:30 am  
 After School Care 3:30 – 6:00 pm

<b>Before School Care Sign-Up</b>					
Please estimate times of drop-off					
Student(s)	Monday	Tuesday	Wednesday	Thursday	Friday

  

<b>After School Care Sign-Up</b>					
Please estimate times of pick-up					
Student(s)	Monday	Tuesday	Wednesday	Thursday	Friday

<b>Per Session Cost</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; padding: 5px;">\$10</td> </tr> <tr> <td style="padding: 5px;">\$5 if dropped off after 8:00 am or picked up before 4:15pm.</td> </tr> </table>	\$10	\$5 if dropped off after 8:00 am or picked up before 4:15pm.
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**OBLIGATION OF PARENT / FAMILIES**

- I agree to the following:
- a) I have read, understand, and agree to make payments as follows: each month (around the 1<sup>st</sup>) notice will be given through Sycamore for the previous month's balance due. **Payments are due through our Automatic Withdrawal program. Please complete ACH form and return to the school office.** The 1<sup>st</sup> withdrawal will be on October 15, 2020 and repeat on the 15<sup>th</sup> of each month with final payment withdrawn on June 15<sup>th</sup>, 2021.
  - b) In the event that I default on this contract, I agree to pay Saint Patrick Parish School all reasonable and necessary costs of collection incurred to collect monies for services provided by Saint Patrick Parish School, including but not limited to: costs of any collection agent or agency; court costs; and all reasonable and necessary attorney's fees.
  - c) Any monies received through the Tuition Assistance application will not be credited to the account until Parent's / Family's portion has been paid in full.

**By signing this document, I am agreeing to the terms set forth in this Contract and will be the Individual(s) responsible for paying the tuition.**

Print Name	Signature	Date
Print Name	Signature	Date
Address: _____		Phone: _____
_____		Cell Phone: _____

<b>Office Use Only</b>		
Contracted Accepted by: _____		
Name	Title	Date