

Trillium Aftercare Agreement
Monday Through Friday
2009-2010

One contract PER CHILD please.

Child's Name _____ Grade _____
Parent/Legal Guardian _____
Parent/Legal Guardian _____

REGISTRATION FEE: \$25 per child (due upon enrollment)

Monthly Fees:

12-3pm	3-6pm
5 days \$320.00	5 days \$320.00
4 days \$220.00	4 days \$220.00
3 days \$180.00	3 days \$180.00
2 days \$136.00	2 days \$136.00
1 day \$96.00	1 day \$96.00
Fri only \$100.00	Fri only \$100.00

Drop in ONLY: \$10.00 per hour on an occasional basis only. \$100.00 deposit per child required. Drop in deposit is fully refundable at the end of the year if unused. Must advise Program Director in advance as instructed below.

Additional Drop In Hours: If your child needs to remain in care beyond the contracted schedule you may pay for additional drop in hours at \$10.00 per hour

Prorate: Prorate is as follows: \$25.00 per day.

Please note! We only prorate tuition if your child enrolls in the middle of the month and in June. There will be NO PRORATE under any other circumstances. (September tuition WILL NOT be prorated)

Late pick up fees: Trillium requires that you pay \$1.00 per minute if your child remains in our program after 6pm. Payment of this fee is due immediately.

My child will attend the aftercare program as indicated below:

Monday: ___ 12-3pm ___ 3-6pm
Tuesday: ___ 12-3pm ___ 3-6pm
Wednesday: ___ 12-3pm ___ 3-6pm
Thursday: ___ 12-3pm ___ 3-6pm
Friday ___ 12-3pm ___ 3-6pm

Contracts must be complete before we can accept your child in our program.

Contracts must be signed and initialed by all financially responsible parties. It is the responsibility of parents to divide tuition payments between split households.

Please initial all items below:

_____ **Drop in only** (\$100.00 per child deposit required)

I will advise aftercare program *in advance* of my child's attendance by calling the Trillium front office.

_____ My **monthly tuition** will be \$_____ due and payable on the *first* of each month. Based on the date of enrollment, the first month's fees will be prorated and paid on or before the day my child begins the program.

_____ **Additional Drop-in Hours**

If I need my child to attend on additional days beyond my contracted days, I understand and hereby agree to pay eight dollars (\$8.00) per child for each additional hour, beyond his/her contracted schedule. (One hour minimum) Payment is due the day of service at time of pick-up.

_____ **Late Payment Fees**

If these fees are not paid in full by the fifth of the month, a twenty-five dollar (\$25.00) late payment charge will be assessed. If the fifth falls on a weekend or holiday, tuition will be due on the first school day after the fifth (5th) to avoid a late payment charge. If full payment has not been received by the 15th of the month, for this contract, my child will be dropped from the program until all fees are paid in full. Accounts in arrears will be turned over to a collection agency.

_____ **Non-sufficient Funds Check**

Returned checks will be charged a twenty-five dollar (\$25.00) fee for the first returned check. After the third returned non-sufficient funds check, all future payments **must be made** with a money order or cashier's check.

_____ **Absences**

There is NO tuition credit for absences during the school year. If my child is absent from elementary school (for any reason) or sent home from school, he/she may not attend After Care for that day.

_____ **Holidays**

AFTERSCHOOL CARE WILL BE CLOSED ON WEEKENDS AND SCHOOL HOLIDAYS. Holidays usually observed, but not limited to: Labor Day, Veteran's Day, Thanksgiving, Winter Break, Spring Break, Memorial Day, and Independence Day. A schedule of holidays will be given out each school year. I understand there will be separate tuition fees for special camps that may be offered throughout the year.

Agreement

I understand that Child Care will be provided for my child only as long as I fulfill each of the above requirements. I also understand and agree that the tuition fee schedule is subject to change at Trillium's discretion, but that I will receive at least four (4) weeks notice of any changes in fee rates. Additionally, in the event Trillium Charter School must institute legal proceedings or other collection proceedings to enforce monies owed, reasonable attorney and other fees paid in connection with the collection of monies due

on my account will be paid by the parent/guardian to the Trillium Charter School. I also understand that I will be responsible for any reimbursements necessary for damages to property caused by my child. **All person's financially responsible for tuition payments as agreed must sign this contract. I am in agreement with all policies stated in this document and agree to abide by them as stated above.**

Parent/Legal Guardian Signature

Print Name

Date

Parent/Legal Guardian Signature

Print Name

Date