



No School Days/Early Dismissal Days Contract for 2016 - 2017

**Deadline: September 19th**

Family: \_\_\_\_\_ School: \_\_\_\_\_  
Names of children: \_\_\_\_\_  
\_\_\_\_\_

SFCs After School Program will provide childcare on no school days from 7:00am until 6:00pm for:

**(Check those for which you are registering)**

\_\_\_ Monday, October 10 @ Holy Spirit site

\_\_\_ Thursday, October 27 @ Holy Spirit site

\_\_\_ Friday, October 28 @ Holy Spirit site

Total number of children \_\_\_\_\_ X Total number of days needed \_\_\_\_\_ X \$25.00 per no school day fee = **TOTAL \$** \_\_\_\_\_

Make checks **payable to SFCS** for the total amount. Sign and Date the form. Return fee and form to your After School Coordinator by **September 19th**.

**OR**

**Check the box below, sign and date if you want the total amount billed on your billing statement.**

*I authorize the inclusion of these charges/credits on my billing statement and understand that automatic payments (ACH) and credit card charges may increase or decrease without further notification. I understand that the amounts authorized on this contract will be billed in addition to the amounts owed on my original Tuition Agreement. **If you have questions, please call the Business Office at 575-3367.***

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**Refunds available only if notification is made in writing to the After School Coordinator prior to the deadline date.**



No School Days/Early Dismissal Days Contract for 2016 -2017

**Deadline: November 11th**

Family: \_\_\_\_\_ School: \_\_\_\_\_

Names of children: \_\_\_\_\_  
\_\_\_\_\_

SFCS After School Program will provide childcare on early dismissal days from time of dismissal until 6pm at your after school site: **(Check those for which you are registering)**

\_\_\_ Wednesday, November 23

Total number of children \_\_\_ X Total number of days needed \_\_\_ X \$15.00 per early dismissal day fee = **TOTAL \$** \_\_\_\_\_

Make checks **payable to SFCS** for this amount. Return fee and form to your After School Coordinator by **November 11<sup>th</sup>**.

**OR**

**Check the box below, sign and date if you want the total amount billed on your billing statement.**

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\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

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No School Days/Early Dismissal Days Contract for 2016 -2017
Deadline: November 29th

Family: School:
Names of children:

1.) SFCS After School Program will provide childcare on early dismissal days from time of dismissal until 6pm at your after school site: (Check those for which you are registering)

Thursday, December 22nd

Total number of children X Total number of days needed X \$15.00 per early dismissal day fee = TOTAL \$

2.) SFCS After School Program will provide childcare on no school days from 7:00am until 6:00pm for:

(Check those for which you are registering)

- Friday, December 23 @ Holy Spirit site
Monday, December 26 @ Holy Spirit site
Tuesday, December 27 @ Holy Spirit site
Wednesday, December 28 @ Holy Spirit site
Thursday, December 29 @ Holy Spirit site
Friday, December 30 @ Holy Spirit site
Monday, January 2 @ Holy Spirit site

Total number of children X Total number of days needed X \$25.00 per no school day fee = TOTAL \$

Make checks payable to SFCS for this amount. Return fee and form to your After School Coordinator by November 29th.

OR

Check the box below, sign and date if you want the total amount billed on your billing statement.

I authorize the inclusion of these charges/credits on my billing statement and understand that automatic payments (ACH) and credit card charges may increase or decrease without further notification. I understand that the amounts authorized on this contract will be billed in addition to the amounts owed on my original Tuition Agreement. If you have questions, please call the Business Office at 575-3367.

Parent Signature Date

Refunds available only if notification is made in writing to the After School Coordinator prior to the deadline date.



No School Days/Early Dismissal Days Contract for 2016 -2017

**Deadline: January 4th**

Family: \_\_\_\_\_ School: \_\_\_\_\_

Names of children: \_\_\_\_\_  
\_\_\_\_\_

SFCS After School Program will provide childcare on no school days from 7:00am until 6:00pm for: **(Check those for which you are registering)**

\_\_\_ Friday, January 13 @ Holy Spirit Site

\_\_\_ Monday, January 16 @ Holy Spirit Site

Total number of children \_\_\_\_\_ X Total number of days needed \_\_\_\_\_ X \$25.00 per no school day fee = **TOTAL \$** \_\_\_\_\_

Make checks **payable to SFCS** for this amount. Return fee and form to your After School Coordinator by **January 4th**.

**OR**

**Check the box below, sign and date if you want the total amount billed on your billing statement.**

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\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**Refunds available only if notification is made in writing to the After School Coordinator prior to the deadline date.**



No School Days/Early Dismissal Days Contract for 2016 -2017

Deadline: January 20th

Family: \_\_\_\_\_ School: \_\_\_\_\_

Names of children: \_\_\_\_\_  
\_\_\_\_\_

1.) SFCS After School Program will provide childcare on early dismissal days from time of dismissal until 6pm at your after school site: **(Check those for which you are registering)**

\_\_\_ Friday, February 3

Total number of children \_\_\_\_\_ X Total number of days needed \_\_\_\_\_ X \$15.00 per early dismissal day fee = **TOTAL \$** \_\_\_\_\_

2.) SFCS After School Program will provide childcare on no school days from 7:00am until 6:00pm for: **(Check those for which you are registering)**

\_\_\_ Thursday, February 16 @ Holy Spirit site

\_\_\_ Friday, February 17 @ Holy Spirit site

\_\_\_ Monday, February 20 @ Holy Spirit site

Total number of children \_\_\_\_\_ X Total number of days needed \_\_\_\_\_ X \$25.00 per no school day fee = **TOTAL \$** \_\_\_\_\_

Make checks **payable to SFCS** for this amount. Return fee and form to your After School Coordinator by **January 20th**

**OR**

**Check the box below, sign and date if you want the total amount billed on your billing statement.**

*I authorize the inclusion of these charges/credits on my billing statement and understand that automatic payments (ACH) and credit card charges may increase or decrease without further notification. I understand that the amounts authorized on this contract will be billed in addition to the amounts owed on my original Tuition Agreement. **If you have questions, please call the Business Office at 575-3367.***

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**Refunds available only if notification is made in writing to the After School Coordinator prior to the deadline date.**



No School Days/Early Dismissal Days Contract for 2016 -2017

**Deadline: February 24th**

Family: \_\_\_\_\_ School: \_\_\_\_\_

Names of children: \_\_\_\_\_  
\_\_\_\_\_

SFCS After School Program will provide childcare on no school days from 7:00a.m. until 6:00pm for: **(Check those for which you are registering)**

\_\_\_ Thursday, March 16 @ Holy Spirit site

\_\_\_ Friday, March 17 @ Holy Spirit site

Total number of children \_\_\_\_\_ X Total number of days needed \_\_\_\_\_ X \$25.00 per no school day fee = **TOTAL \$** \_\_\_\_\_

Make checks **payable to SFCS** for this amount. Return fee and form to your After School Coordinator by **February 24th** .

**OR**

**Check the box below, sign and date if you want the total amount billed on your billing statement.**

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Parent Signature

\_\_\_\_\_  
Date

**Refunds available only if notification is made in writing to the After School Coordinator prior to the deadline date.**



No School Days/Early Dismissal Days Contract for 2016 -2017

**Deadline: March 24th**

Family: \_\_\_\_\_ School: \_\_\_\_\_

Names of children: \_\_\_\_\_  
\_\_\_\_\_

1.) SFCS After School Program will provide childcare on early dismissal days from time of dismissal until 6pm at your after school site: **(Check those for which you are registering)**

\_\_\_ Thursday, April 13

Total number of children \_\_\_\_\_ X Total number of days needed \_\_\_\_\_ X \$15.00 per early dismissal day fee = **TOTAL \$** \_\_\_\_\_

2.) SFCS After School Program will provide childcare on no school days from 7:00am until 6:00pm for:

**(Check those for which you are registering)**

\_\_\_ Friday, April 14 @ Holy Spirit site

\_\_\_ Monday, April 17 @ Holy Spirit site

Total number of children \_\_\_\_\_ X Total number of days needed \_\_\_\_\_ X \$25.00 per no school day fee = **TOTAL \$** \_\_\_\_\_

Make checks **payable to SFCS** for this amount. Return fee and form to your After School Coordinator by **March 24th**.

**OR**

**Check the box below, sign and date if you want the total amount billed on your billing statement.**

*I authorize the inclusion of these charges/credits on my billing statement and understand that automatic payments (ACH) and credit card charges may increase or decrease without further notification. I understand that the amounts authorized on this contract will be billed in addition to the amounts owed on my original Tuition Agreement. **If you have questions, please call the Business Office at 575-3367.***

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Parent Signature

\_\_\_\_\_  
Date

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