LINCOLN DOWNTOWN FAMILY YMCA ASU PREPARATORY ACADEMY
2019/2020 BEFORE & AFTER SCHOOL ADVENTURES

ADVENTURES is not licensed by the state of Arizona

Child's name_____ Birth date _____ Grade_____ Age_____

Parent's name_____ Birth date _____ *(Required for registration)*

Address _____ City _____ AZ Zip code _____

Primary Phone (C) or (H)_____ Work _____

Parent's E-mail address_____ *(Required for registration)*

MY CHILD'S FIRST DATE OF CARE: _____	**Draft on the 1ST of every month**
AFTER SCHOOL ADVENTURES: 5 DAYS/WEEK	**COST PER MONTH**
After school child care from school dismissal until 6:00PM	**$ 100**
BEFORE SCHOOL ADVENTURES: 5 DAYS/WEEK	**COST PER MONTH**
Before School child care from 7:00am until school commences	**$45**

PROGRAM CLOSED: ●Labor Day *Any other days will be posted if needed*

DUE AT TIME OF REGISTRATION:

$35 or 0	Child Care Registration Fee/per child or waived with Family Membership	For office use only
$	August due at time of registration	ID #
Total due today: _____	**Paid by:** ☐ Check # _____ ☐ CASH ☐ CREDIT CARD	Date Staff Initials
Draft Begins on: 9/01/2019		

SESSION BILLING IS BASED ON THE FULL SCHOOL YEAR PRICE AND THEN DIVIDED INTO EQUAL PAYMENTS FOR JULY-DECEMBER. EACH MONTH YOU PAY AN EQUAL AMOUNT OF YOUR TOTAL BILL, REGARDLESS OF THE NUMBER OF SCHOOL DAYS ACTUALLY OCCURRING IN THAT MONTH. THIS INCLUDES MONTHS THAT CONTAIN INTERSESSIONS & SCHOOL BREAKS. THE Y DOES NOT GIVE CREDITS FOR ILLNESSES, HOLIDAYS OR FAMILY VACATIONS TAKEN DURING SCHOOL DAYS. ALL PLANS USE THE ATS BANK DRAFT (CREDIT/DEBIT CARD) SYSTEM AND ARE WITHDRAWN ON THE 1ST OF EACH MONTH. REGISTRATIONS MUST BE RECEIVED 10 DAYS PRIOR TO THE 1ST TO BE INCLUDED ON THE DRAFT OR PRE-PAYMENT IN FULL FOR THAT MONTH IS REQUIRED.

IF YOUR FINANCIAL INSTITUTION FOR ANY REASON RETURNS YOUR PAYMENT, THE ITEMS WILL BE RE-PRESENTED ELECTRONICALLY AND YOU WILL BE CHARGED A $25 PROCESSING FEE. IF YOU ARE LATE IN PICKING UP YOUR CHILD (REN) A DOLLAR PER MINUTE LATE FEE WILL BE APPLIED TO YOUR ACCOUNT. YOU MAY DISENROLL WITH A 30 DAY PRIOR WRITTEN NOTICE. THIS NOTICE MUST BE TURNED INTO THE YMCA.

DUE DATES/BANK DRAFT DATES: 8/1 9/1 10/1 11/1 12/1

I have read, understand, and agree to adhere to the YMCA child care program Statement of Services, payment policies, and give the YMCA permission to use photographs of my child, in a group setting, for YMCA promotional materials.

MY SIGNATURE ACKNOWLEDGES MY UNDERSTANDING AND AGREEMENT TO THE ABOVE.

_____

Parent/Guardian's Signature Date

Financial Assistance is available upon request. You must fill out, attach a Financial Assistance form, and provide proof of income.