

# AFTER-SCHOOL PLUS (A+) PROGRAM REGISTRATION AGREEMENT

1<sup>st</sup> Child's Name \_\_\_\_\_ School \_\_\_\_\_

2<sup>nd</sup> Child's Name \_\_\_\_\_

3<sup>rd</sup> Child's Name \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_

## PARENT/LEGAL GUARDIAN'S RESPONSIBILITIES AND BILLING PROCEDURES

Parent/Legal Guardian's Responsibilities/Agreements: Please initial each of the following to indicate that you have read, understand, and agree with each item.

I understand and agree that:

- \_\_\_\_\_ 1. My child(ren) is not allowed to come and go freely from the A+ Program site.
- \_\_\_\_\_ 2. My child(ren) must sign-in each day and I (or authorized adult) must sign him/her out each day.
- \_\_\_\_\_ 3. My child(ren) will be released only to adult(s) listed on the registration form.
- \_\_\_\_\_ 4. I must maintain communication with the Site Coordinator/Group Leader about my child(ren) and keep him/her informed of pertinent changes.
- \_\_\_\_\_ 5. I must notify the Site Coordinator/Group Leader of daily departure changes.
- \_\_\_\_\_ 6. I must contact the A+ Program when my child(ren) will be absent on any of his/her scheduled days of attendance, regardless of whether he/she was absent from school. I realize this is for my child(ren)'s protection.
- \_\_\_\_\_ 7. If a medical emergency arises, the A+ Program will first attempt to contact me. If I cannot be reached, the A+ Program will attempt to contact adults authorized by me in case of emergency, and that if no authorized adults can be reached, appropriate treatment will be secured at the nearest medical facility. If a major illness or injury is involved, my child(ren) will be transported by ambulance to a designated site and/or physician and I am financially responsible for any medical care or transportation incurred on my child(ren)'s behalf.
- \_\_\_\_\_ 8. The A+ Program will operate from close of school to 5:30 p.m. each school day or at another designated time as determined by the site. The program will not operate during school vacations, state holidays, Teacher Institute Day, and school half-days.
- \_\_\_\_\_ 9. Transportation to and from the A+ Program will not be provided. If my child(ren) attends an A+ Program at a school other than his/her regular school, I must make transportation arrangements and assume responsibility for getting my child(ren) to the other school.
- \_\_\_\_\_ 10. It is my responsibility to see that my child(ren) is picked up by the designated closing time.
- \_\_\_\_\_ 11. If my child(ren) is having problems in the program, a conference will be arranged between myself, the staff, and the Site Coordinator.
- \_\_\_\_\_ 12. The A+ Program reserves the right to terminate A+ Program services if it is determined that placement is unsatisfactory.
- \_\_\_\_\_ 13. If weather or other emergency forces the closing of regular school, the A+ Program will also be closed.
- \_\_\_\_\_ 14. If my work/school schedule changes, I must notify the A+ Site Coordinator about the changes.
- \_\_\_\_\_ 15. I am aware and authorize that my child(ren) may participate in physical development/coordination activities during A+.
- \_\_\_\_\_ 16. I understand that my child(ren) will be given an option of alternative activities if they choose not to participate in physical development/coordination activities during A+.

**Fee Procedures:** Please initial each of the following certifying that you have read, understand and agree with each item.

I understand and agree that:

- \_\_\_\_\_ 1. I am responsible for monthly A+ Program tuition.
- \_\_\_\_\_ 2. I shall pay the monthly tuition when it is due or it must be postmarked before the first school day of each month. Payment for December/January combined months will be paid in December.
- \_\_\_\_\_ 3. I must not send payments to school with my child(ren), but must bring or mail them to the A+ Program at the school.
- \_\_\_\_\_ 4. The monthly tuition I pay for my child(ren) is a flat rate, and that it does not depend on the number of days my child(ren) actually attends the program.
- \_\_\_\_\_ 5. The A+ Program will make no refunds once tuition is paid for the month even if my child(ren) has attended only part of the month, e.g., even for one day.
- \_\_\_\_\_ 6. I must pay a \$25.00 service charge (cash or money order) for checks that I write to the program that are returned by the bank because of insufficient funds.
- \_\_\_\_\_ 7. I understand that the monthly A+ Program tuition is due on or before the first school day of each month. I shall pay a \$5.00 late charge per family for each school day a payment is overdue. If I do not pay the monthly tuition within the first five (5) A+ Program days of the month, it will result in my child(ren)'s immediate termination from the A+ Program on the sixth (6th) A+ Program day.
- \_\_\_\_\_ 8. Failure to pay any outstanding fees by the end of the month shall result in my child(ren)'s termination from the program.
- \_\_\_\_\_ 9. My child(ren) may re-enroll if I pay all outstanding fees, and a penalty fee of \$25 for reinstatement. If I have more than one child enrolled in the A+ Program, my family is penalized a flat reinstatement fee of \$25.
- \_\_\_\_\_ 10. I will arrange for another authorized adult to pick up my child(ren) if the adult responsible for my child(ren)'s pick-up is to be late. If no other arrangements can be made, I will make every effort to call the school to notify A+ staff of my expected tardiness.
- \_\_\_\_\_ 11. If my child(ren) is picked up late, I will pay a \$5.00 late fee per child for every 15 minutes beyond the closing time, (that is, 1-15 minutes late – \$5.00; 16-30 minutes late – \$10.00, etc.) and that chronic tardiness may result in my child(ren)'s termination from the A+ Program.

I understand and agree to abide by the above parent responsibilities and billing procedures. I understand and agree that my failure to do so may result in termination of my child(ren)'s enrollment in the A+ Program.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date