



All Day Release Enrollment Form **Fee and Attendance Agreement**



Child/Children's Name: _____

- I wish to enroll my child in the All Day Release (ADR) program.
- I understand that there is a \$15.00 enrollment fee for the ADR program, as well as a \$10 supply fee. (The enrollment fee may be waived if you are already enrolled in another School Age Connections program.)
- I understand that this enrollment form does not guarantee a spot for my child on any given ADR day.
- I understand that I must sign up, in advance, for any ADR days I would like my child to attend the program.
- I understand that if I sign up for a particular day, I will be responsible to pay for that day, unless I notify the Director 24 hours in advance that my child will not be attending.
- I understand that if my child is enrolled ONLY in the All Day Release program, I will owe \$20 for that day.
- Children who are already enrolled in a SAC afterschool program:
 - I understand that if my child attends an ADR day that occurs on a day I have already contracted for in my Fee & Attendance Agreement, I will owe \$12 for that day.
 - I understand that if my child attends an ADR day that occurs on a day I have NOT contracted for in my Fee & Attendance Agreement, I will owe \$20 for that day.
- I understand that ADR tuition is billed monthly and that I will be billed during the first week of the month following the month in which my child attended.
- I understand that if my fees become delinquent, a late fee of \$10 per week, per child, will be charged to me.
- I understand that non-payment of tuition will result in my child's spot being forfeited, and that I will not be allowed to enroll my child in any other SAC program, until outstanding balances are paid in full.

Link Subsidy Families:

- I understand that I am responsible for submitting a copy of my Link certificate to the Director before my child can attend any SAC program.
- I understand that the SAC afterschool programs and the All Day Release program require separate certificates.
- I understand that I am responsible for my co-payment and any other fees that need to be paid, including late fees, the Enrollment fee, the Supply fee, field trip fees, and any days/hours not covered by my LINK Certificate.
- I understand that not paying my co-payments on time could result in closure of my Link certificate.

Signature of Parent or Guardian

Signature of Parent or Guardian

Social Security Number

Social Security Number

Date

Date

Signature of Site Supervisor or SAC Director

Date