



2018 - 2019 Extended Day Contract Lower School - Kindergarten through Fourth Grade

STUDENT'S NAME _____ GRADE _____
First Last

(Please circle options below)

<i>For 4, 3, 2 and 1 day(s), please circle the days of the week you will be using care.</i>	AM and PM 7:30 a.m. to 8:30 a.m. 3:15 p.m. to 6:00 p.m.	Early Bird 7:30 a.m. to 8:30 a.m.	After School 3:15 p.m. to 6:00 p.m.
5 Days	\$550/mo	\$200/mo	\$400/mo
4 Days Mon Tues Wed Thurs Fri	\$440/mo	\$160/mo	\$320/mo
3 Days Mon Tues Wed Thurs Fri	\$330/mo	\$120/mo	\$240/mo
2 Days Mon Tues Wed Thurs Fri	\$220/mo	\$80/mo	\$160/mo
1 Days Mon Tues Wed Thurs Fri	\$110/mo	\$40/mo	\$80/mo

Please list any dietary restrictions and/or food allergies that your student may have:

- **Payments are due PRIOR to services provided.** Payments must be made through ACH method (form located on the back of this contract and at www.westsideschool.org.) You will not be billed for the month of June to compensate the shortened months of December and June. Extended Day hours for In-Service Days are included, but will still require paid registration for full day care.
- **Drop-in Extended Day registration is available online.** Please register no later than 12:00 p.m. on the day of use, to ensure that Westside can appropriately staff the program. Drop-in "Early Bird" care is available for \$10.00 per day. Drop-in "After School" care is available for \$30.00 per day. Students that are on campus past 3:45 p.m. will be asked to join the Extended Day Program for supervision, and parents will be billed the flat rate drop-in fee.
- **Extended Day After School Care closes at 6:00 p.m.** All students must be picked up no later than 6:00 p.m. Services provided after 6:00 p.m. are charged \$2.00 per minute. Should there be an accumulation of three late pick-ups for a student Extended Day services may be terminated.
- **Changes to an existing contract can be made by e-mailing childcare@westsideschool.org.** Provide thirty days notice for contract changes. Changes to the terms of the Extended Care contract will not take effect until thirty days from the documented request for change date. The Business Office will notify you of the change in monthly fee based on the changes to the contract. Charges will be prorated accordingly.

By signing this contract you understand and agree to the terms outlined.

Responsible party to **PAY** for child care services:

Print Name: _____ Signature: _____ Date: _____

Child care services must be paid by ACH. Please complete the banking information **on reverse side.**



BEFORE AND AFTER SCHOOL CHILDCARE PAYMENT DESIGNATION FOR AUTOMATED CLEARINGHOUSE (ACH) PAYMENT OF FEES

Student Name: Last _____ First _____

The undersigned hereby acknowledges Westside School will initiate debit entries to the account at the Depository designated below, for the purpose of collecting fees (such as listed below) for the student(s) above.

It is further acknowledged it remains the account holder's responsibility to notify Westside School of changes in depositories or account numbers and to have adequate funds in the account to be debited to properly pay the remittance due to the School.

The undersigned agrees to notify Westside School of a change of the above designated Routing Transit Number or Account Number at least ten days prior to the next established payment date.

The undersigned acknowledges failure to ensure funds in an amount at least equal to the invoiced amount are available to Westside School for direct debit shall be deemed to constitute nonpayment of the assessment resulting in assessment of applicable late and NSF fees outlined in the Westside School Family Handbook.

(Please print clearly)

Account Holder Name: _____ Phone Number: _____

Address: _____

City: _____ State _____ Zip _____

Email (required): _____

Depository (Bank) Name _____ or attach a "voided" check to this form.

ROUTING TRANSIT NUMBER OF FINANCIAL INSTITUTION ABOVE (9 digit number)

Grid of 9 empty boxes for routing transit number

ACCOUNT NUMBER TO BE DEBITED (17 digit maximum)

Grid of 17 empty boxes for account number

BEGINNING DATE: September 2018 ENDING DATE: May 2019

Childcare payment, in the amount of \$_____ to be debited from my account on the 1st of the month services are received.

Signed _____ Date _____

Print Name: _____