

**Middle School
Extended Day Contract
2019-2020 School Year**



For Office Use only:
Date Received:

Student's Name _____ Grade _____
(6 - 8)

Program dates: Regular school days between August 19, 2019 and May 22, 2020.

Annual charge:

_____ 5 days / 3:30 p.m. – 6:00 p.m., \$1,000

OR

_____ Drop In, \$16 per day (No enrollment fee required)

After 6:00 p.m. you will be billed at the rate of \$1.00 per minute for the first 10 minutes and \$2.00 per minute thereafter.

Please add the above fees to my PHS Monthly Pay Plan, which runs from May through April.

We jointly and severally agree to pay to The Pembroke Hill School the Extended Day fees selected above.

Signature: _____ Date: _____
(Parent/Guardian Financially Responsible for Student)

Cell Phone: _____ Home Phone: _____

Signature: _____ Date: _____
(Parent/Guardian Financially Responsible for Student)

Cell Phone: _____ Home Phone: _____

Return to the business office at 400 W. 51st Street, KCMO 64112 or businessoffice@pembrokehill.org.