

## Desert Meadows/ Estrella Foothills/ Vista Del Sur Kids Club Registration 2024-25 Agreement Start and End Dates: August 05, 2024 to May 21, 2025

Student Information			
Child's Name:	Birth Date://	Home School:	Grade:
Address:	City	Zip code	
Parent/Guardian Information	<u>on</u>		
Parent #1 Name:	Contact Phone Number: Em		il:
	Contact Phone Number: E		
Plans and Fees Non-Refundable \$35.00 Regist	ration Fee (Due Yearly)		
Check the box for the plan(s) for	or which you are registering:		
☐ Morning Plan (up to 5 days ea	ach week): Weekly Fee: \$40.00		
☐ <u>Afternoon Plan</u> (up to 5 days	each week): Weekly Fee: \$62.00		
☐ Full Time- Before Care and Af	ternoon Care (up to 5 days each we	eek): Weekly Fee: \$92.0	0
☐ <u>Part-Time Afternoon Plan</u> (up	to 3 days each week): Weekly Fee:	\$48.00	
□ <u>Drop In Minimum Usage Fee</u>	(due on the 1 <sup>st</sup> of each month) Mor	nthly Fee: \$25.00	
☐ <u>Drop In After Care</u> (must be p	repaid) Daily Fee: \$20.00		
☐ <u>Drop In Before Care</u> (must be	prepaid) Daily Fee: \$15.00		
□ <u>Drop In Early Release Day</u> (Ea *Only available at Desert Meadows	rly Dismissal 1:30 p.m. Must be pre	paid): Daily Fee: \$25.00	
Read and Initial Each Staten			
	to adhere to the parent handbook and paymen	t policies.	
I understand payment is due on Frid	···		
	is not paid on Friday prior to service my child ca I will be charged a \$10.00 late fee.	annot attend and will be sent to	the school office for
I understand <b>NO CREDIT</b> will be give	en for days that are not used. Accounts cannot l	be placed in hold.	
I understand a TWO WEEK WRITTE	N NOTICE IS REQUIRED TO STOP OR DECREASE	SERVICES.	
I understand Kids Club does not offer activities	er one-on-one services and my child needs to be	e able to participate in a group	setting, this includes group
I understand that if my child will be dates and times. This includes a	attending any after-school extracurricular activ	rities I am to notify the Kids Clul	office in writing with start/end

I give permission for my child to be photograph the pictures and/or videotapes reproduced brochures, and school/district website	•	٠	
Parent /Guardian's Signature	Date		<del></del>
DES Authorized Services  I understand if my DES services stop, I a I understand if I fail to follow DES rules re I will be responsible for that day's tuition I understand I am responsible for paying	egarding times and sigr fees.	natures on the attendance	e sheet
Registration will not be accepted wit	hout the followin	g documentation a	attached:
<ul><li>□ Completed registration form with s</li><li>□ Immunization record</li><li>□ Court papers (if applicable)</li></ul>		☐ ADHS Emerge☐ IEP (if applica	ency information form ble)
If you wish to change your original All changes must be done in person located at Desert Meadows School.		-	_
New registration form submitted or \$20 fee will be assessed on the 3rd			date:
☐ I am currently employed for the	e Laveen School	District 2024-202	5 school year.
Must submit current pay stub or If you resign from the Laveen Dis I understand if I fail to notify the I responsible to pay the difference between	strict, you must no Kids Club Office of	tify the Kids Club O f my departure from	ffice in writing of your departure. the Laveen District, I will be
Due at Time of Registration:  \$ Registration Fee (Non-Refundable   \$ First-week Tuition Payment   \$ Total Due today	·)		
Fees can be paid online or by check, money Kids Club office.	/ order in the design	ated checkboxes. Cas	sh payments can only be made at the
Start Date:	_		
For Office Use Only			_
ProCare Information: Parent/ Guardian	Office Copy		_
Billing	Site Copy		
Ledger/Tracking	DES Authorization	Received	_
Billed Registration/Supply / 1st Week	School Emailed on	ı <b>:</b>	_
Information: Rosters	Processed By:		