

Summer Camp Agreement

2020

Attendance sheet contract

The Latchkey Alternative Center's goal is to provide a quality, fun and safe environment for your child over the summer months. In order to provide that quality care, we must have an accurate count on the number of students attending so that we can employ a sufficient number of staff. Although you are not obligated to use the entire summer, you MUST provide us with the dates of attendance by May 25, 2020 to qualify for the summer special rates.

We appreciate your summer enrollment.

Please sign below and return with your fees:

I, _____, understand in order to qualify for the free day, I must reserve dates of when my child/children will attend by 5-25-20. I understand that there are nine weeks of summer camp and I can enroll for any number of weeks. Once I sign and return the agreement, I understand that I am obligated to pay for the weeks enrolled below. There will be "NO" reimbursements for sick, unused time and or vacation. I understand that the following arrangements of this agreement are:

- * Free day must be used on Monday.
- * I understand that a non-refundable \$200 deposit must be made by May 3rd in order to qualify for all discounts and reserve a space.
- * I have placed my reserved dates attached; I understand that if there are any changes made after May 25, 2020 there will be a \$150 "change" fee. Due to staffing I understand that I am responsible to pay for all dates listed below regardless of attendance. The \$200 deposit amount will be credited to my child's last payment.
- * Summer reminder sheet/policy form has been read and agreed upon.
- * I have been notified of all discounts for early enrollment. Paying in one installment, 50% off registration, multiple child discount, and free day.
- * ~~I understand that the weekly fees are all inclusive of attendance time. BART and MUNI fees, two snacks, arts and craft fees, and admission fees.~~ I will provide a non-heat able lunch for my child every day.
- * All tuition is due on the first of each month for weeks used during that month. OR one single installment payment needs to be made by June 15, 2020.

I understand that I am enrolling my child/children _____ with the above stipulations. I have filled out the attached form with the weeks requested.

Signature

Phone #

Date

Pd. Fees