

All Saints Catholic School
4001 36th Avenue, N.W.
Norman, Oklahoma 73072

2009-10 KID'S CLUB CONTRACT

Student Name _____ Grade _____

Father's/Guardian's Name _____ Home Phone _____
Work Phone _____ Cell Phone _____

Mother's Name _____ Home Phone _____
Work Phone _____ Cell Phone _____

Name of individual(s) responsible for payment _____

Please check plan/s your family will be utilizing:

_____ **Kid's Club** -\$1,750/\$175 per month (3 day - \$105 a month)

Extra Care (Additional Charge) (above does not include full-day care)

_____ **Full Day Care** (4 days per year)- \$25.00 per day (please check dates attending)
_____ September 25; _____ October 23; _____ February 15; _____ March 26;

I choose to pay:

- _____ Annually One payment of \$ _____ due on August 10, 2009.
_____ Semester Two payments of \$ _____ due on August 10, 2009 and January 10, 2010
_____ Quarterly Four payments of \$ _____ due on August 10, 2009, October 10, 2009, January
10, 2010 and April 10, 2010
_____ Monthly Ten payments of \$ _____ due on the 10th of each month- August through May

By signing this contract I agree to pay the above amount. Discounts or refunds will not be given to students who attend part-time or do not attend the entire period. Drop-ins are for emergencies only. Students attending more than once a month are to have a contract. Thirty days written notice to the Kid's Club Director is required to cancel this contract. During the 30 days, the parent/guardian is responsible for all payments due. Students picked up after 6 p.m. will be charged \$1 per minute, due at time of pick-up. Families with a past due Kid's Club account will not be allowed to reenroll at All Saints Catholic School or the Kid's Club program until the account is cleared.

Parent/Guardian Signature

Date

Kid's Club Director Signature

Date