

Bethlehem Lutheran After School Care

1837 N. Mountain St.
Carson City, NV 89703
(775) 882-6718

Dear Parent(s):

Bethlehem Lutheran is currently taking enrollment for the 10/11 school year for **students registered to attend Bethlehem Lutheran School and Preschool.** This is on a **first come first serve basis.** There will be a **flat fee for the week, due and payable on the first day of the week.** The School Board adopted the following fee schedule on January 16, 2010:

Category 1	Up to 10 hours per week	\$50.00	Registration Fee \$50
Category 2	Up to 20 hours per week	\$65.00	Registration Fee \$50
Category 3	Up to 30 hours per week	\$80.00	Registration Fee \$50
Category 4	Up to 40 hours per week	\$95.00	Registration Fee \$50

- Payment is due each week including times your child is sick or you take your child on vacation.
- Daycare **WILL NOT be open** Thanksgiving week Nov 22nd-26th, Christmas Break Dec. 20th-Dec. 31st, and Easter Break April 25th-29th.

Please complete and return this form **with the registration fee, remembering it's accepted on a first come first serve basis.** Put a check mark to indicate the days and between what hours your student will be using the After School program. Due to the number of students we have, **we are unable to accept drop-in students.**

Name of student to be enrolled: _____ Grade entering _____

	M	T	W	T	F
7:00-8:00 AM	_____	_____	_____	_____	_____
11:30-12:00 PM	_____	_____	_____	_____	_____
12:00-1:00 PM	_____	_____	_____	_____	_____
1:00-2:00 PM	_____	_____	_____	_____	_____
2:00-3:00 PM	_____	_____	_____	_____	_____
3:00-4:00 PM	_____	_____	_____	_____	_____
4:00-5:00 PM	_____	_____	_____	_____	_____
5:00-5:30 PM	_____	_____	_____	_____	_____

I have read the fee schedule and agree to pay the flat weekly amount of _____ for my student being enrolled in Category _____. I understand that if my account is **2 weeks in arrears** I will receive a reminder statement. **At 3 week a\$15 late fee will be added and my child's spot at the center is also in jeopardy.** A late pick-up fee of **\$10.00 per child** for every **15 minutes** starting at 5:30 p.m. will be charged.

Signature of Parent or Guardian

Date

Phone number