



**Kids Klub Registration
Vista del Sur Traditional School**

Child's Name _____ Birth date _____ Age _____ Grade _____
 Address _____ City _____ Zip _____
 Parent's Name _____ E-mail _____
 Home Phone _____ Cell Phone _____ Work Phone _____

Registration Fee (non-refundable) \$35.00

Plans (Circle the fee of the plan you are registering for.)	Fees (weekly)	Sibling Discount
1. Morning Plan (5 days each week)	\$35.00	31.50
2. Afternoon Plan (5 days each week)	\$55.50	\$49.95
3. Part time afternoon (3 days each week)	\$42.50	38.25
4. Full-Time (before and after school 5 days each week)	\$72.00	Already discounted
5. Drop in minimum use fee (due on the first of the month)	\$20.00 a month	N/A
6. Drop in After School program (must be pre-paid)	\$15.00 a day	N/A
7. Drop In Before School program (must be pre-paid)	\$10.00 a day	N/A
8. Drop in (early school dismissal 12:00 p.m.)(must be pre-paid)	\$20.00 a day	N/A

____ (Initial) I have read, understand, and agree to adhere to the parent handbook and payment policies.
 ____ (Initial) I understand payment is due on Fridays, prior to services.
 ____ (Initial) I understand if my tuition payment is not paid on Friday prior to services my child cannot attend, and I will be billed a \$10.00 late fee.
 ____ (Initial) **NO CREDIT** will be given for days that are not used. Accounts cannot be placed on hold.
 ____ (Initial) I give permission for my child to be photographed or videotaped in a school-related setting, including public programs provided by schools, and have the pictures and/or videotapes reproduced in the media and/or school-related publications such as, but not limited to, newsletters, brochures, and school/district websites.
 ____ (Initial) **KIDS KLUB REQUIRES A TWO WEEK WRITTEN NOTICE TO STOP SERVICES, OR DECREASE SERVICES.**

Parent/Guardian's Signature

Date

Registration will not be accepted without the following documentation attached:

- Completed registration form with signature
- Immunization record
- Court papers (if applicable)
- Emergency information (blue card)
- IEP (if applicable)

If you wish to change your original registration you must complete a new registration form. All changes must be done in person two weeks prior to effective date at the Kids Klub Office located at Desert Meadows School.

New Registration form submitted on _____ \$20.00 fee on the 3rd registration change. Change effective date: _____

DES Authorized Services

____ (Initial) I understand if my DES services stop I am subject to the same fees as cash paying participants.
 ____ (initial) I understand if I fail to follow DES rules regarding times and signatures on the attendance sheet I will be responsible for that day's tuition fees.

DUE AT THE TIME OF REGISTRATION:

\$ _____ Registration fee (non-refundable) (no discount on registration fee)
 \$ _____ First week payment
 \$ _____ 10% Discount Second Child
 \$ _____ Total due today

Start Date: _____
 This agreement ends May 24, 2018

For online payments go to: <https://laveenesd.revtrak.net>

Kids Klub office 602-237-7058

For Official Use Only

Paid by:
 Check # _____ \$ _____
 Money # _____ \$ _____
 Online Payment # _____ \$ _____

Procure: Information _____
 Billing _____, Ledger _____ Billed _____/_____
 Info _____, office copy _____ site copy sent _____
 DES auth received _____ parent called _____ School emailed _____