

Child's Name _____ Birth date _____ Age _____ Grade _____ Home school _____

Parents Name _____ Contact phone number _____ E-mail _____

Registration Fee (nonrefundable, if not paid for the 2017/18 school year) \$35.00

Plans (circle the fee of the plan for which you are registering)	Fees
Full Week, October 9 to 13 if currently attending Kids Klub (normally attends both AM and PM program)(or 5 days in the PM program)	\$115.00
Full Week, October 9 to 13	\$125.00
Part Time, Three Day Rate Circle days attending October 9, 10, 11, 12, 13	\$85.00
Drop Ins, Circle days attending October 9, 10, 11, 12, 13	\$31.00 a day
Half Day, less than 6 hours (Must be pre-approved) limited space	\$25.00 a day



____ (Initial) I have read, understand, and agree to adhere to the parent handbook and payment policies.

____ (Initial) NO CREDIT will be given for days that are not used.

____ (Initial) I understand the fee pays for direct operating cost; staff, snacks, materials, etc., which are all available to your child. When you enroll you are reserving time, space, staffing, and provision for your child whether he/she attends or not.

____ (Initial) **Each child will need to bring a sack lunch.**

____ (Initial) I give permission for my child to be photographed or videotaped in a child care 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.

Parent/Guardian's Signature

Date

DUE AT THE TIME OF REGISTRATION OR AT DROP OFF

\$ _____ Full week payment \$125.00

\$ _____ Full week payment \$115.00

\$ _____ 3 Day payment \$85.00

\$ _____ Drop in \$31.00 x # of days

\$ _____ Half Day \$22.00 X # of days pre approved by coordinator _____

\$ _____ **Total due October 6th**

This form can only be dropped off at your child's Kids Klub program until October 2nd.

After October 2nd it can be dropped off at the Kids Klub office, emailed to Kidsklub@laveeneld.org or brought with you on the first day of attending Kids Klub Day Camp.

Kids Klub office 602-237-7058

Day camp opens at 6:00 A.M and closes at 6:00 P.M

If you have DES, you must notify your case worker and have them authorize your child care services:

For the dates of Fall Break 10/9 to 10/13
Laveen Dist#59 Desert Meadows Kids Klub
6855 West Meadows Loop East
Laveen Az 85339
602-237-7058
Provider number P0001981004

After you have done this DES will contact the Kids Klub office to authorize services. **We must have received authorization by 10/4, or your child/ children will not be able to attend.**