



Kids Klub Registration Agreement
M.C. Cash

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

Registration Fee (non-refundable) \$35.00 yearly

Table with 3 columns: Plans (circle the fee of the plan you are registering for), Fees (weekly), Sibling discount. Rows include Afternoon Plan, Part-Time, One hour, Drop in minimum use fee, Drop in (must pre-paid), and Drop In (early dismissal).

____ (Initial) I have read, understand, and agree to adhere to the parent handbook and payment policies.
____ (Initial) I understand full payment is due on Friday prior to service.
____ (Initial) I understand if my tuition payment is not paid on Friday prior to service my child cannot attend, and I will be billed a \$10.00 late payment fee.
____ (Initial) NO CREDIT will be given for days that are not used. Accounts cannot be placed on hold.
____ (Initial) I understand that if my child is registered for the one hour program and she/he stays past 3:30 I will be charged the drop in rate of \$15.00 for that day.
____ (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 DECREASE OR STOP 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)
ADHS Emergency information
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 copays are based on the Registration Agreement not the number of days the child attends.
____ (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) (registration fee is not discounted)
\$ _____ First week payment (10% off second sibling)
\$ _____ Total due today

Start day: _____
Agreement ends on May 22, 2019

Fees can be paid online, or by check and money order in the check box. Cash payment can only be paid at the Kids Klub office. For online payments go to: https://laveenesd.revtrak.net

For official Use only
Revised 4/6/2018

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

Procure: info _____
Billing _____, Ledger _____ Billed _____/_____
Info _____, office copy _____ site copy sent _____
DES auth received _____, called _____ sch emailed _____