



Kids Klub Registration Agreement
Vista del Sur Accelerated Academy

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 yearly

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 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)
- 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 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) (no discount on registration fee) **Start Date:** _____
 \$ _____ First week payment (10% off second sibling) Agreement ends May 22, 2019.
 \$ _____ Total due today

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 Paid by: Check # _____ \$ _____ Money # _____ \$ _____ Online Payment # _____ \$ _____	Procure: Information _____ Billing _____, Ledger _____ Billed _____/_____ Info _____, office copy _____ site copy sent _____ DES auth received _____ parent called _____ School emailed _____
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