

# S C H O O L O F T H E INCARNATION

## Pre-K-Grade 8 Extended School Program Registration Commitment 2018-2019

I/We choose to have our child enrolled in School of the Incarnation Extended School Program (ESP). In doing so, I/we agree to the following:

- ❖ To support the policies and values of the Extended School program as outlined in the ESP Parent Handbook.
- ❖ To support and work with the Director, Group Leaders and Aides regarding all issues of concern.

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Parent Name \_\_\_\_\_ Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

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Street Address \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

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Child's Name \_\_\_\_\_ Grade 2018-2019 \_\_\_\_\_

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Email Address \_\_\_\_\_

**\*\*\*A non-refundable fee of \$25.00 for each child is required; it will be billed through FACTS.**

**\*\*\*If you attend any portion of a month you are obligated for the entire month.**

**\*\*\*Withdrawals from program will only be accepted through April 1, 2019**

### Extended School Program Amount billed per month

	1 <sup>st</sup> Child	2 <sup>nd</sup> Child	3 or more Children (per child)
___AM only (6:30-8:00am)	\$140.00	\$105.00	\$78.00
___PM only (3:00-6:00pm) +	\$278.00	\$208.00	\$156.00
___AM and PM (see above) +	\$372.00	\$279.00	\$210.00
___Early Dismissal Days Only (12:15-6:00pm)	\$ 50.00* each child per month		

\*Note: This is the fee for all half days (Early Dismissal Days). You must enroll in the annual program, not on a per day basis.

+ Early Dismissal Days ARE included in the "PM" and "AM & PM" options (but not in the "AM only" option).

## Payment

You will be billed in 10 installments through FACTS Incidental billing and be required to make your payment within 15 days beginning in September and ending in June through FACTS. Late payments will incur a \$25.00 late fee.

**All ESP payments are to be made through FACTS for the 2018-2019 school year**

**Please return this form in an envelope marked "ESP"**

**Deadline: Returning students - May 31, 2018 New students – July 1, 2018**

Parent/Guardian Signature: \_\_\_\_\_ Date Received: \_\_\_\_\_