



Attendance Contract

To provide a quality Child Care program for your child, staff must be scheduled appropriately. Staff are scheduled in relation to the number of children attending the program each morning and afternoon.

- Please circle the number of days your child(ren) will attend the Before & After School Program for the upcoming 2020-2021 school year.
- **During the modified hybrid learning program, in order for us to hold your child's spot in our program, you will automatically be charged \$25/child (before school) a day and/or \$12.50/child (after school) a day for the number of days you select below. For example, if you indicate that your child will attend Before School Care 4 days per week, you will automatically be charged \$ 100.00 per week regardless of attendance. If your child attends more days than are scheduled below, you will be billed for those additional days. Does not apply to Martin Elementary**
- When normal hours resume, In order for us to hold your child's spot in our program, you will automatically be charged \$10.00/child (before school) per day and/or \$12.50/child (after school) per day for the number of days you select below. For example, if you indicate that your child will attend Before School Care 4 days per week, you will automatically be charged \$40 per week regardless of attendance. If your child attends more days than are scheduled below, you will be billed for those additional days
- Charges will still be occurred regardless of days missed for illness or dismissals, etc. Charges will not occur for school closures related to weather, etc.

To change your schedule, you must call the Lancaster Rec front office two weeks in advance.

School Your Child Attends: _____

Parent Name: _____

Child(ren) Name(s): _____

	Before School Program				
	Please circle the days of the week your child(ren) will be attending. Charges will automatically occur for the days you select.				
Total to be paid per week:	Monday	Tuesday	Wednesday	Thursday	Friday

	After School Program				
	Please circle the days of the week your child(ren) will be attending. Charges will automatically occur for the days you select.				
Total to be paid per week:	Monday	Tuesday	Wednesday	Thursday	Friday

Parent Signature: _____ Date: _____

Email Address: _____

This form must be completed and turned in with all registration materials before your child may attend Child Care programs.