

# **CONYERS AFTER-SCHOOL PROGRAM APPLICATION**

# **CONYERS ADVENTIST ACADEMY**

A support program of CAA

Application Year:			
Child's Name:	Gra	de: Age:	
Parent's Name:			
(Mother or Legal Guardian – Please Print)	(Father or Legal Guardian – Please Print)		
Street Address:			
City:	_ State:	Zip:	
Cell: Phone No:			
Email:			
Child's Name:	Grade: _	Age:	
Medical Problems: Allergies: YesNo	<u> </u>		
Others authorized to pick up your child:			
Name / Telephone	Name / Telephone		
Name / Telephone	Name / Telephone		
Signature of Parent/Legal Guardian	Date	<u> </u>	



## CONYERS ADVENTIST ACADEMY

#### POLICIES AND PROCEDURES FOR TUITION and the AFTERCARE PROGRAM

## **TUITION POLICY**

Tuition is due on the 1<sup>st</sup> Monday of every month. Tuition is considered late if paid after the 10<sup>th</sup> of the month. A \$25.00 late fee is charged on accounts where tuition is paid after the 10<sup>th</sup> of the month. If the tuition is not paid by two weeks after the 10<sup>th</sup> of the month, the parent will be advised to keep the student at home until the account can be brought current. As a practical matter we have allowed the parents until the end of the month before asking them to keep the student at home.

## AFTERCARE POLICY

After-school program fees should be paid in advance for those who pay weekly or monthly. Payments are due the Monday of the week of service (or the first day of the month of service for those paying monthly). Payments are considered late if paid after the close of the business day on Monday. If a parent is using the service on a day-to-day basis, then payment is due each day when the child is picked up.

The After-school rate is \$175 per month, \$50 per week, and \$15 per day for drop-ins. PROCEDURES – Parents must pay their After-school account. An attendance roster is provided to maintain a record of attendance. It is mandatory for you to sign in/out your child each time day and time of attendance. The number of days shown on the roster will determine if you will be billed daily or weekly. If you fail to sign the roster or pay for your after-school services, it will be notated in the roster and your child will not be able to return to the program until you have done so. If the matter is not resolved in a timely manner the amount will be applied to your tuition bill.

All monies collected for any given week will be prepared for deposit on the day it is received. There is a \$25 fee for all returned checks. A \$1.00 fee will be added for each minute you arrive after hours.

I agree to the above	e-mentioned policies an	d procedures and i	realize they will b	e strictly enforced
Parent/Guardian	Signature			

**Please Print Name**