



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

**YMCA of Metropolitan Denver
Joe Shoemaker
School Age Childcare Rate Agreement
2018-2019 School Year**

Child's Name _____ Grade _____

Parent's Name _____

Home Phone _____ Work Phone _____

Email _____

Monthly Rates please check one Plan A* Plan B**

Full-Time (4-5 days a week):

Before Only	_____ \$130.00	_____ \$170.00
After Only	_____ \$225.00	_____ \$255.00
Before and After	_____ \$275.00	_____ \$325.00

August is prorated at Before \$40.00, After \$60.00, B & A \$70.00

Part-Time (3 days a week):

Before Only	_____ \$125.00	_____ \$160.00
After Only	_____ \$185.00	_____ \$210.00
Before and After	_____ \$235.00	_____ \$280.00

August is prorated Before \$35.00, After \$50.00, B & A \$65.00

Part-Time (2 days a week):

Before Only	_____ \$120.00	_____ \$130.00
After Only	_____ \$170.00	_____ \$195.00
Before and After	_____ \$220.00	_____ \$250.00

August is prorated \$30.00, After \$45.00 B & A \$60.00

**Drop in for Before or After is \$15 per day drop in for Full day out is \$45.00
Registration fee is \$35.00 per child**

Plan A: Provides care on school days and full days out due to teacher in-service days if space is available.

Plan B: Provides care on school days and full days out as well as care during several holidays and school breaks. These days vary by location, but typically include Fall Break, two weeks for Holiday Break, Spring Break, New Year's Eve, Martin Luther King Day etc.

Plans may not be changed after October 1st.

I understand that the months full payment is due on the first(1st) of each month. A late fee will ensure for payments received after the 5th of the month. Any account not paid in full by the 15th of the month will result in the participant being unregistered from the program for the remainder of the month and any future time registered.

Parent Signature _____ **Date** _____