

School-Age Children

ST. JOSEPH'S (HILL) LUTHERAN CHURCH DAYCARE CENTER
244 Koch Road, Boyertown, PA 19512
610-367-1980 / hillchurch@ptd.net
Robin Schmale, Director

Day Care Agreement Effective June 3, 2019- May 29, 2020

Child's Name: _____

Please do not write in fees

Original date of Admission _____ Date of Withdrawal _____

SUMMER SCHEDULE: (June 10, 2019 - August 23, 2019)

Times child will attend: Monday Arrival Time: _____ Pick Up Time: _____
 Tuesday Arrival Time: _____ Pick Up Time: _____
 Wednesday Arrival Time: _____ Pick Up Time: _____
 Thursday Arrival Time: _____ Pick Up Time: _____
 Friday Arrival Time: _____ Pick Up Time: _____

Tuition Fee: _____
 Weekly due Monday
for the current week.

Not applicable (summer care not needed)

Date ending care for the summer: _____ Returning date for the school year: _____

SCHOOL YEAR SCHEDULE: (August 26, 2019-June 5, 2020) Not applicable (care during school year not needed)

Please indicate grade level for 2019-2020 School Year _____ AM Kindergarten _____ PM Kindergarten _____

Times child will attend: Monday Arrival Time: _____ Pick Up Time: _____
 Tuesday Arrival Time: _____ Pick Up Time: _____
 Wednesday Arrival Time: _____ Pick Up Time: _____
 Thursday Arrival Time: _____ Pick Up Time: _____
 Friday Arrival Time: _____ Pick Up Time: _____

Tuition Fee: _____
 Weekly due Monday
for the current week.

My child may need to attend the center on early dismissal, off school, holidays, or snow days: Yes No

SCHOOL AGE TRANSPORTATION: (September-June) / Not applicable

School District/Elementary School Child will attend: _____

Transportation Needed: **Grades 1-6** AM only PM only Both AM and PM
Kindergarten (check all that apply) AM Noon PM

Boyertown School District
Transportation Fee:
 \$10.00 per week - one way trip
 \$15.00 per week - two way trip

ADDITIONAL FEES: \$10.00 late fee for every 10 minutes of care after 6:00 pm.

Summary of Services to be provided by St. Joseph's (Hill) Lutheran Church Day Care Center: academic program appropriate for the age and developmental level of your child that includes social, emotional, spiritual, mental and physical development / classroom materials / morning and afternoon snack / milk & apple juice / and field trips.

We acknowledge receipt of the 2019-2020 Parent Handbook and agree to abide by the policies stated in the handbook.

Signature/Date: _____

Print Name: _____

Director Signature/Date: _____

Please complete back of form

Parent 6 month Review Signature/Date