



AfterSchool Program

Concord Recreation

2019-20

Grades K-5

NAME (LAST, FIRST) D.O.B. M/F

ADDRESS TOWN ZIP

PARENT/GUARDIAN NAME (LAST, FIRST)

CELL PHONE BUSINESS PHONE

EMAIL

PARENT/GUARDIAN NAME (LAST, FIRST)

CELL PHONE BUSINESS PHONE

EMAIL

DOES YOUR CHILD HAVE ANY CHRONIC HEALTH CONDITIONS, ALLERGIES, ASTHMA AND/OR SPECIAL ACCOMMODATIONS? **YES** **NO**

IF YES, PLEASE DESCRIBE

Days Requesting Monday Tuesday Wednesday Thursday Friday

Grade K 1 2 3 4 5

School Alcott Thoreau Willard

Monthly Tuition-Kindergarten

5 Days \$708

4 Days \$409

3 Days \$307

2 Days \$261

Surcharge: T and Th \$232

Surcharge: T or Th \$146

(unless registering for 5 days)

Monthly Tuition-Grades 1-5

5 Days \$603

4 Days \$409

3 Days \$307

2 Days \$261

Surcharge: Tues \$146

(unless registering for 5 days)

Registration Fees

Prior to June 1 - \$30

After June 1 - \$75

REGISTRATION AND BILLING INFORMATION

- There is a two day minimum for AfterSchool care.
- Tuition is billed in 10 equal installments with the first non-refundable installment due at registration
- Registration must be received by July 19 for an August 28 start date.
- Registrations received after July 19 will be processed on a first come first served basis

WAIVER OF LIABILITY

I hereby give my permission for the registrant to participate in the AfterSchool Program. I understand that the Town of Concord carries no insurance for participant. I agree to hold harmless the Town and/or, its employees and volunteers from any claim or liability related to any accident that may occur. I give my permission for medical treatment if the need arises.

If my child is accepted, I understand and agree to the following: My child cannot attend unless all required paperwork/documentation and medical forms (along with necessary medication) have been received by the program.

Signature Date

PAYMENT

Card #

Exp. Date / V-Code Master Card Visa Check

Name on card

Signature Date