

St. Mary School

Extended Day Child Pickup Authorization

Name of Child _____

Name of Adult	Relationship	Form of ID to be Used
---------------	--------------	-----------------------

Name of Adult	Relationship	Form of ID to be Used
---------------	--------------	-----------------------

Name of Adult	Relationship	Form of ID to be Used
---------------	--------------	-----------------------

I understand that the above-captioned are the only person(s) designated to pick up my child from St. Mary School Extended Day Program. In the event that another person is going to pick up my child at any time I will immediately notify the program of any change and what identification is to be used. The Director will have a sign out sheet that must be signed by the parent or designated person(s) pickup up my child each day.

Parent/Guardian Signature _____ Date _____

FEE PAYMENT AGREEMENT

I understand that a nonrefundable **enrollment fee of \$6.00 per family** will be paid at the time of registration. The **hourly rate is \$3.60 per child.**

A \$5.50 fee will be added each billing period for payments that are late. Payments are due seven (7) days after the bill is issued. If bills are not picked up in Extended Day, they will be sent home with hour child. I agree to pay any late fees incurred when a late pickup occurs or when payment in full is not made within the time period stated.

Late Fees: \$5.50 for each 15-minute period past 5:30 P.M.
 \$5.50 late payment fee (each week late)

Parent/Guardian Signature _____ Date _____