

Millstadt C. C. School District No. 160
Panther Place Registration Form
Before and After School Program 2021-2022

Student Name: Last _____ First _____ DOB _____ Grade _____

Home Address: _____ Home Phone: _____

Additional Children:

Name: Last _____ First _____ DOB _____ Grade _____

Name: Last _____ First _____ DOB _____ Grade _____

Parent/Guardian Name: _____ Cell Phone: _____

Parent/Guardian-Email Address(s): _____

Employer: _____ Work Phone: _____

Parent/Guardian Name: _____ Cell Phone: _____

Employer: _____ Work Phone: _____

Please indicate the anticipated schedule you are enrolling for: **First day of Attendance:** _____

Full-time (4-5 days per week) _____ **Before School Program** and/or _____ **After School Program**

M T W TH F **Drop Off:** _____ **Pick Up:** _____

Part-time (1-3 days per week) _____ **Before School Program** and/or _____ **After School Program** _____ **PLC Only**

M T W TH F **Drop Off:** _____ **Pick Up:** _____

Payment Choice: _____ **Monthly Budget Billing** _____ **Weekly Payment** _____ **Pre-K** _____ **Annually**

Emergency Contacts/Authorized Adults Permitted to pick up your child

For the safety and well being of your child, it is required that an adult **who is at least 16 years of age** sign in and out your child. Complete names and phone numbers are required.

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

If you or the emergency contacts cannot be reached, and if in the judgment of the program authorities immediate medical and/or hospital attention is needed, including ambulance service, do you authorize responsible school authorities to send your child (properly accompanied) to an available hospital and accept the fees involved? Yes _____ No _____

Please list special health conditions or care instructions to staff:

Parent/Guardian Signature

Date

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Registration Fees

A \$25 Registration Fee per family will be charged each Calendar Year.

Weekly Rates

Weekly fees	A.M. & P.M. 4-5 days	P. M. Only 4-5 days	A. M. Only 4-5 days	A.M. & P.M. 1-3 days	P. M. Only 1-3 days	A. M. Only 1-3 days
1st child	\$65.00	\$50.00	\$35.00	\$45.00	\$35.00	\$25.00
Each Additional Child	\$60.00	\$45.00	\$35.00	\$35.00	\$25.00	\$25.00

Weekly fees are to be paid on Friday for children attending the following week. A late fee of \$10.00 can be charged for payments made after 5:30 p.m. the previous Friday. Students may not attend until all fees have been paid.

Monthly Budget Billing (Savings Plan)

Monthly Budget Billing (Savings Plan)	A.M. & P.M. 4-5 days	P. M. Only 4-5 days	A. M. Only 4-5 days	A.M. & P.M. 1-3 days	P. M. Only 1-3 days	A. M. Only 1-3 days
1st child	\$230.00	\$165.00	\$95.00	\$150.00	\$110.00	\$80.00
Each Additional Child	\$200.00	\$135.00	\$95.00	\$135.00	\$100.00	\$80.00

The monthly budget billing plan is based upon the number of days the student attends divided by 9 equal payments. If the budget plan is selected, you may not switch to weekly payments. The first payment for budget billing will be due the first day of school in August. The remaining payments will be due each month, September through April on the same day as the first day of school. The budget plan provides for a savings and remains the same throughout the year even though the number of days per month may vary. A late fee of \$10.00 could be charged for payments received after the budget billing dates listed above.

Drop-In Students and Early Dismissal Days Rates

Drop-In Students	1 st Child-\$20.00 per day Each Additional Child- \$20.00 per day	This program is for students that are not on a regular schedule and occasionally need after-school care.
Wednesday Only (PLC) Days	\$15.00 per child per day \$325 per child for whole year if paid in full.	Students will be able to attend every Wednesday afternoon from 2:30 p.m. until 5:30 p.m.

The Panther Place Childcare program may be offered on select days of non-student attendance at a rate of \$30 per day per child. Parent/Teacher conferences, Teacher Institutes and Election days are examples of days when the program may be offered.

Refunds will only be given if the program is cancelled.

Make all checks or money orders payable to:

Millstadt C. C. School District No. 160

Federal Tax ID # 37-6004501

IMPORTANT NOTE: All fees are current but may be subject to change before the start of the school year.