



**THE BRIDGES**  
ACADEMY

**Pre-K – GR8  
Before-Care / After-Care Request**

*September 2017*

MUST BE SUBMITTED BY: TUESDAY, AUGUST 8<sup>th</sup>, 2017

Please do not send cash or check with this form. The charge for this service will be posted on your Smart Tuition Account.

- **Before-Care: [K-8 7:30-8:00AM] [Pre-K 8:00-9:00AM]**

a) PREPAID: \$15
b) REQUESTED ON DAY OF NEED: \$20

- **After-Care:**

2:45PM - 5:30PM	2:45PM – 6:00PM
a) PREPAID: \$20	a) PREPAID: \$30
b) REQUESTED ON DAY OF NEED: \$25	b) REQUESTED ON DAY OF NEED: \$35

*\*Any account not charged by Tuesday, 8/8 will be charged the daily rate per day. \**

- **Availability** Only on days that school is in full session.
- **Refund** Only when there is an unexpected school closure such as inclement weather.
- **Late Charge** If child is picked-up late after the pick-up time, please be aware there will be a \$15 late fee per occurrence.

Student Name \_\_\_\_\_ Grade/Teacher \_\_\_\_\_

Write **B** for Before-Care and/or **A** for After-Care, in the dated box in need:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
				1
4	5	6	7	8
11	12	13	14	15
18	19	20	21	22
25	26	27	28	29

	<u>Before-Care</u>	<u>After-Care</u>	<u>TOTAL AMT. DUE</u>
Total # of Days	_____	_____	
Daily Charge	X _____	X _____	
Total	_____	+ _____	= <span style="border: 1px solid black; display: inline-block; width: 80px; height: 20px; vertical-align: middle;"></span>

**Required authorization:**

I authorize The Bridges Academy to charge my Smart Tuition account \$ \_\_\_\_\_ for

Before-Care/After-Care services. Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_