



Redeemer Montessori School BEFORE AND AFTER SCHOOL CARE 2018-2019

RMS offers before school care from 7:30 to 8:30 a.m. and after school care from 3:00 to 6:00 p.m. The table below represents the rates for daily time intervals ranging from 1 to 3.5 hours per day.

Time per day	Hourly Rate (overages to be billed at this rate)	1/5 Semester Payments (due with tuition)	Semester Rate (5 Months Total)
1.0 hr	\$3.96	\$71.20	\$356.00
1.5 hr	\$3.60	\$97.20	\$486.00
2.0 hr	\$3.12	\$112.40	\$562.00
2.5 hr	\$2.82	\$127.00	\$635.00
3.0 hr	\$2.58	\$139.40	\$697.00
3.5 hr	\$2.46	\$155.00	\$775.00
<i>Siblings will be billed at half price (pre-pays only).</i>			

A **Drop-In** option is available for emergency situations, and will be charged at the rate of \$8.00 per hour with a minimum charge of \$4.00.

Please complete the form below with your BASC requirements and return it to the office.

Child's name: _____ Parent's name: _____

- I will require _____ PRE-PAID hours of BASC for my child.
Mornings (M,T,W,Th,F) please circle Afternoons (M,T,W,Th,F) please circle

- I will require **DROP-IN** BASC per the following schedule:
Mornings (M,T,W,Th,F) for Approximate Amount of Time: _____
Afternoons (M,T,W,Th,F) for Approximate Amount of Time: _____

Signed: _____ Date: _____

Agreement on
BACK



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CHILD'S NAME

*It is imperative that parents read and understand all aspects of the RMS-BASC agreement, which is a legal and binding document. **Please INITIAL** after reading each point.*

_____ The monthly BASC payment is due at the first of every month along with the monthly tuition payment and is calculated on the estimated number of hours required.

_____ By enrolling in a pre-paid plan, I am securing care for the estimated number of hours whether I use all of the pre-paid hours each month. I understand that it is my responsibility to estimate my plan as closely as possible to actual hours needed.

_____ Actual calculated time spent in BASC is used to assess enrollment in the appropriate pre-paid program as well as bill accounts when time used exceeds pre-payment, but is not used to provide credits for unused minutes.

_____ All adjustments to BASC plans must be submitted to the office in writing and may only be made at the time of the tuition payment. Adjustments will be subject to a prorated amount and a \$10 administration fee.

_____ A late fee of **\$2.00 per minute** will be charged for every minute my child remains in care after 6:00 pm.

Parent signature: _____

Date: _____