



Mater Gardens Academy Charter School

9010 NW 178 Lane
Miami, FL 33018
305-512-9775 • 305-512-3708 Fax



After-school care contract 2009-2010

This is a 2-sided form. Please print clearly on **both sides** of the form and be sure to complete all information.

Check the appropriate option(s):

- Before-school care (7:00 A.M.-8:15 A.M.)
- Mini-care Pre-K/K Wednesdays (2:00 P.M.-3:00 P.M.)*
- Mini-care elementary (Grades 1-5) (3:00-4:00 P.M.)*
- Mini-care middle (Grades 6-8) (3:15-4:00 P.M.)*
- Mini-care Wednesdays elementary (2:00-3:00 P.M.)*
- Mini-care Wednesdays middle (2:30-3:00 P.M.)*
- After-school care (2:00 P.M.-5:45 P.M.)
- Before AND after-school care
- Before AND mini-care
- Before AND mini-care WEDNESDAYS only

** Mini-care students will not participate in the program's activities, such as music and art. They will receive a snack. If a child in mini-care wishes to participate in the program's activities, then the fee is \$12 for the after-school care stay per day.*

Names of the child(ren):	Grade level(s):

Please note the following information regarding our before-school and after-school programs:

1. The after-school care program hours for Pre-K and Kindergarten students are from 2:00-5:45 P.M. The hours for the students in grades 1-5 are 3:00-5:45 P.M. Grades 6-8 are from 3:15-5:45 P.M. On Wednesdays, the after-school program for grades K-5 begins at 2:00 P.M, and grades 6-8 begins at 2:30 P.M.-5:45 P.M.
2. After-school care will be billed at a rate of \$8.00 per day. Before-care or mini-care is billed at \$5 a day. A family with more than one child will receive a 5% discount from the total bill.
3. Requests for occasional before-school and after-school care must be received 24 hours in advance- please contact the before-school and after-school care secretary, Dulce, during the office hours. The rate for occasional after-school care enrollment is \$12 a day.
4. Payments for the before-school and after-school care programs must be paid by the calendar dates (see attached). Payments received after the deadlines are considered late. An administrative charge of \$20 per day will be assessed for payments received past the deadlines. A charge of \$35 is assessed for any returned checks received. Please write the names of the students in the program in checks to ensure proper processing.
5. If you will be late in picking up your child(ren) from school, please call 305-512-9775 to arrange emergency drop-in care. Tell the after-school care staff member when you (or the authorized adult) will arrive to pick up your child(ren) and leave an emergency phone number where you can be reached. **Please be advised that if your child is picked up after 5:45 P.M., a charge of \$5.00 per minute will be applied and must be paid within a week.**
6. Even if you only use the mini-care program, you need to register and list the persons authorized to pick up your child(ren) from the program.

If you have any questions or concerns about the before and after-school care programs, please contact the director, Pilar Perez, or secretary, Dulce Madera, during the office hours for the program.

I have read and agree to the information above. If more than one person is to be financially responsible, both must sign and will be jointly responsible.

Please print parent or guardian's name (1) _____

Parent or guardian's signature (1) _____ Date _____

Please print parent or guardian's name (2) _____

Parent or guardian's signature (2) _____ Date _____

After-school care student information card
2009-2010

** please fill one out for each student*

Name of student:
Home Address: If there is a home address for an additional parent or guardian, please list below:
Home Phone: If there is a home phone number for an additional parent or guardian, please list below:
Cell Phone: If there is a cell phone number for an additional parent or guardian, please list below:
E-mail address: If there is a cell phone number for an additional parent or guardian, please list below:
Work number: If there is a work number for an additional parent or guardian, please list below:
List any allergies, conditions, or medications:
Names and phone numbers of two additional, authorized persons for emergency contact: _____ _____

Must be paid by the 5th of each Month

Late fee of \$20.00 per day will be assessed after the 5th of each month.

NO EXCEPTIONS

August-2009

6-days of after/care x \$8.00= \$48.00
6-days of before/care x \$5.00= \$30.00
6-days of before/after = \$78.00
6-days of M/care x \$5.00= \$30.00
1-days Wed/only x \$8.00=\$8.00
5-days M/care/not/wed \$5.00=\$25.00
1-days M/Wed \$5.00= \$5.00

September-2009

20-days of after/care x \$8.00= \$160.00
20-days of before/care x \$5.00= \$100.00
20-days of before/after = \$260.00
20-days of M/care x \$5.00= \$100.00
5-days Wed/only x \$8.00= \$40.00
5-days M/care/not/wed \$5.00= \$75.00
5-days M/Wed \$5.00= \$25.00

October-2009

20-days of after/care x \$8.00= \$160.00
20-days of before/care x \$5.00= \$100.00
20-days of before/after = \$260.00
20-days of M/care x \$5.00= \$100.00
4-days Wed/only x \$8.00=\$32.00
16-days M/care/not/wed \$5.00=\$80.00
4-days M/Wed \$5.00= \$20.00

November-2009

18-days of after/care x \$8.00= \$144.00
18-days of before/care x \$5.00= \$90.00
18-days of before/after = \$234.00
18-days of M/care x \$5.00= \$90.00
3-days Wed/only x \$8.00= \$24.00
14-days M/care/not/wed x \$5.00= \$70.00
3-days M/Wed \$5.00= \$15.00

December-2009

14-days of after/care x \$8.00= \$112.00
14-days of before/care x \$5.00= \$70.00
14-days of before/after = \$182.00
14-days of M/care x \$5.00= \$70.00
3-days Wed/only x 8.00=\$24.00
11-days M/care/not/wed \$5.00=\$55.00
3-days M/Wed \$5.00= \$15.00

January-2010

18-days of after/care x \$8.00= \$144.00
18-days of before/care x \$5.00= \$90.00
18-days of before/after = \$234.00
18-days of M/care x \$5.00= \$90.00
4-days Wed/only x \$8.00= \$32.00
14-days M/care/not/wed \$5.00= \$70.00
4-days M/Wed \$5.00= \$20.00

February-2010

March-2010

19-days of after/care x \$8.00= \$152.00
19-days of before/care x \$5.00= \$95.00
19-days of before/after = \$247.00
19-days of M/care x \$5.00= \$95.00
4-days Wed/only x \$8.00=\$32.00
15-days M/care/not/wed \$5.00=\$75.00
4-days M/Wed \$5.00= \$20.00

April-2010

19-days of after/care x \$8.00= \$152.00
19-days of before/care x \$5.00= \$95.00
19-days of before/after = \$247.00
19-days of M/care x \$5.00= \$95.00
4-days Wed/only x \$8.00=\$32.00
15-days M/care/not/wed \$5.00=\$75.00
4-days M/Wed \$5.00= \$20.00

21-days of after/care x \$8.00= \$168.00
21-days of before/care x \$5.00= \$100.00
21-days of before/after = \$273.00
21-days of M/care x \$5.00= \$100.00
4-days Wed/only x \$8.00= \$32.00
15-days M/care/not/wed \$5.00= \$80.00
4-days M/Wed \$5.00= \$20.00

May-2010

20-days of after/care x \$8.00= \$160.00
20-days of before/care x \$5.00= \$100.00
20-days of before/after = \$260.00
20-days of M/care x \$5.00= \$100.00
4-days Wed/only x \$8.00= \$32.00
16-days M/care/not/wed \$4.00= \$80.00
4-days M/Wed \$5.00= \$20.00

**YOU MUST PAY IN ADVANCE TO ENSURE
YOUR CORRECT PAYMENT SCHEDULE.**

**THERE WILL NOT BE REFUNDS IF THE
STUDENT IS ABSENT.**