

# LOMA VERDE • BILLING SCHEDULE 2011–2012

## Tuition Rates (per 4 week session)

	<b>Morning 7:00–8:30</b> Program / Facility	<b>Kindie Time 45 min. 8:30–9:45 or 2:15–3:00</b> Program / Facility	<b>Kindie Time 2 hours 2 Hours</b> Program / Facility	<b>Afternoon 3:00–6:00</b> Program / Facility
1 day .....	\$46 / 41 .....	\$30 / 25 .....	\$62 / 57 .....	\$93 / 88
2 day .....	\$77 / 67 .....	\$50 / 40 .....	\$103 / 93 .....	\$155 / 145
3 day .....	\$109 / 94 .....	\$73 / 58 .....	\$145 / 125 .....	\$218 / 203
4 day.....	\$134 / 114 .....	\$90 / 70 .....	\$179 / 159 .....	\$270 / 250
5 day .....	\$166 / 141 .....	\$109 / 84 .....	\$220 / 195 .....	\$331 / 306

## Transitional Kindie • 11:30–3:00

1 day .....	\$93 / 88
2 day .....	\$155 / 145
3 day .....	\$218 / 203
4 day.....	\$270 / 250
5 day .....	\$331 / 306

## Additional Tuition Options

Program Membership (Annual).....	\$50 for individual / \$75 for family
Registration Fee (Annual).....	\$65
Full Day (7:00–6:30) on No School Days.....	\$45
Hourly Drop-in .....	\$10
Late pick-up .....	\$5 a minute for pick-up after closing

- Payment is due in advance by the 20th of each month. A \$25 fee will be applied for late payment.
- No credits will be given for holidays, illness, in service days or vacations.
- Registration and Program Membership are non refundable.
- Two week notice for cancellation or decrease in days must be indicated on a status change form and turned into the Site Director.
- Marin Child Care Council, PACE and Cal Works families are responsible for balance of tuition.
- Hourly drop-in days are for non-scheduled day.

<b>4 week Session</b>	<b>Session Dates</b>	<b>Payment / Draft Date</b>
Session 1 .....	August 24–September 2 .....	July 20th (8 day prorate)
Session 2 .....	September 5–30 .....	August 20th
Session 3 .....	October 3–28 .....	September 20th
Session 4 .....	October 31–December 2 .....	October 20th
Thanksgiving Break Camp .....	November 21–25 .....	Payment due upon registration
Session 5 .....	December 5–January 13.....	November 20th
Winter Break Camp.....	December 19–30 .....	Payment due upon registration
Session 6 .....	January 16–February 10 .....	December 20th
Mid Winter Break Camp.....	February 21–24.....	Payment due upon registration
Session 7 .....	February 13–March 16.....	January 20th
Spring Break Camp .....	April 9–13 .....	Payment due upon registration
Session 8 .....	March 19–April 20 .....	February 20th
Session 9 .....	April 23–May 18.....	March 20th
Session 10.....	May 21–June 14.....	April 20th

(Sessions dates are subject to change depending on NUSD budget decisions.)

# LOMA TRANSITIONAL KINDIE • REG. FORM 2011–2012

Child's Name \_\_\_\_\_

Starting Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex:  M  F Age \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Grade \_\_\_\_\_ School \_\_\_\_\_ Room Number \_\_\_\_\_

## Responsible Adult Information:

Name \_\_\_\_\_ Phone (W) \_\_\_\_\_ Phone (Cell) \_\_\_\_\_

Relationship \_\_\_\_\_ Email Address \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Phone (W) \_\_\_\_\_ Phone (Cell) \_\_\_\_\_

Relationship \_\_\_\_\_ Email Address \_\_\_\_\_ Birthdate \_\_\_\_\_

## Transitional Kindie Care

11:30 a.m.–3:00 p.m.:	Program / Facility	Days of Week (please circle)				
1 day/wk.....	\$93 / 88 .....	M	T	W	TH	F
2 days/wk.....	\$155 / 145.....	M	T	W	TH	F
3 days/wk.....	\$218 / 203.....	M	T	W	TH	F
4 days/wk.....	\$270 / 250.....	M	T	W	TH	F
5 days/wk.....	\$331 / 306.....	M	T	W	TH	F

Fee: \$ \_\_\_\_\_

### Annual Giving Campaign

The demand in our community for the programs and services that Marin YMCA provides has grown significantly, and continues to rise. Thanks to the generosity of donors, we have been able to respond to these needs and are working to preserve their benefits.

A contribution will directly impact the lives of the youth, teens, seniors and families in our community.

Your contribution is tax deductible to the extent allowed by law.

Annual Program Membership Fee \$50 or \$75

Annual Registration Fee \$65

4 Week Session Fee \$ \_\_\_\_\_

I would like to make a Campaign Donation \$ \_\_\_\_\_

**TOTAL Due Today** \$ \_\_\_\_\_

Applying for Financial Assistance:  Yes  No

Bank Draft (see page 8):  Yes  No

Check Number \_\_\_\_\_ Check Total \_\_\_\_\_

**See page 8 for one time credit card payment information.**

Site Director Sig. \_\_\_\_\_

Date \_\_\_\_\_