SummerKids 2025 Fee Contract Conover Group

	TE	Enrollment Date	
Please Print Child's Name:		Grade Fall 2024:	School:
Parent's Name:		Email	
Work Phone	Cell	Home	
Parent's Name:		Email	
Work Phone	Cell	Home	
SummerKids Activity Fe	e: \$25 per child regardless of plan		
PLEASE INDICATE RATE	PLAN REQUESTED		
Prepaid – Please us	e the <u>calendar provided</u> to reserve yo Please use the <u>calendar provided</u> to re	•	\$32 per day days
SummerKids (5-da	ay week) - Reserve weeks for attend	ance below	\$135 per week
Week 1 : June 9-13	Week 5 : July 7-11	Week 9: August 4-8	
Week 2: June 16-20	Week 6: July 14-18		
Week 3: June 23-27	Week 7: July 21-25		
Week 4: June 30-July 2 * 3 days Mon-Wed	Week 8: July 28-August 1		
**Summer School – I u \$1' 7 Business a	Pre-Paid — I understand that I will be chand that all payments must bunderstand that I will be charged \$7 per 7 per day for before/after school care an Payments must be submitted by I have advanced notice is required to a prepaid calendar days and All charges will be based on the variable will be given for page 1.5.	bmitted by Friday prior to the warged \$32.00 per day for Summe submitted by Friday prior to to day for before school care, \$12 and \$32 for Friday attendance dustriday prior to the week of care. Schedule and/or change you have weeks and/or days you have	reek of attendance. er Camp the scheduled need. per day for after school care, ring Summer School weeks. er reserved weeks, selected.
arono Guardian Dignature	For Office Use Only – do		
Family qualifies for disco	ounts or assistance Yes No	0	_
School district staff withi	n a Catawba County District (not v	alid for first and last week of	f camp)
\$25 Summer Activity Fee	e per child Paid		