

SUMMER
JULIE ROHR ACADEMY
 4466 Fruitville Road, Sarasota, Florida 34232
 (941) 371-4979
 2 Years Through Incoming 2nd Grade
2019 SUMMER RESERVATION AGREEMENT

Name of Student _____ Birth Date _____ Age _____ (M/F)
 Address _____
 Phone Number _____ SS# _____ Grade Entering _____

AFTER RECEIPT OF THE INITIAL REGISTRATION FEE AND THIS RESERVATION AGREEMENT, the above named student is registered for the 2019 summer session at Julie Rohr Academy. The Registration Fee is **non-refundable** in the amount of \$75.00, due no later than May 1, 2019. Reservation agreements are due March 1, 2019.

Rates for the summer session are based on a one week time period. It is necessary for you to commit to a certain number of weeks for the summer and you will be responsible for payment for those weeks over the summer. There is no minimum on number of weeks. Additional hours are considered extended care and are 6:30 AM until 6:00 PM. Second child discount is 20% and any additional children are 30% off.

Weekly Rates:

Any student currently in PreSchool

<u>NUMBER OF DAYS</u> (8:00 AM to 1:00 PM for PreSchool)	<u>TUITION</u>	<u>ADD EXTENDED CARE</u> (Before 8:00 AM and/or after 1:00 PM)
5 Days	\$155.00	\$35.00
4 Days	\$135.00	\$30.00
3 Days	\$115.00	\$25.00
2 Days	\$95.00	\$20.00

Any student currently in PK, TK, K or 1st

<u>NUMBER OF DAYS</u> (PK, TK, K, & 1 st) – 8:00 AM to 3:00 PM	<u>TUITION</u>	<u>ADD EXTENDED CARE</u> (Before 8:00 AM and/or after 3:00 PM)
5 Days	\$175.00	\$15.00
4 Days	\$155.00	\$10.00
3 Days	\$135.00	\$5.00
2 Days	\$115.00	\$5.00

We serve lunch only on Friday which is a pizza lunch. Pizza can be purchased for \$3.75. All other days lunches are packed from home. We do provide a morning and afternoon snack.

Please return form by March 1st, 2019 to assure placement of your child.
Registration Fee of \$75 is due by May 1, 2019.

My child will attend _____ weeks this summer (there are 11 weeks total). The weeks my child will attend this summer are: (circle) May 28, June 3, June 10, June 17, June 24, July 1, July 8, July 15, July 22, July 29, and August 5.

_____ My child will attend 8 AM – 1:00 PM ONLY (PreSchool)

_____ My child will attend 8 AM – 3 PM ONLY (PreK, TK, K, 1st)

_____ My child will attend before and/or after the school camp hours listed above and will need extended care.

My child will attend _____ days per week.

Please circle the days your child will attend: M T W TH F

My cost of tuition plus extended care if applicable will be:

\$ _____ + \$ _____ = \$ _____ per week (refer to chart).
(tuition) (extended care) (total)

The total amount of tuition I will pay this summer is:

\$ _____ x _____ = \$ _____
(weekly amount) (no. of weeks) (total summer)

It is understood that tuition and extended care payments are required for all weeks committed to by the parent. This may be paid weekly by Monday of each week. This may also be paid monthly at the beginning of each month by paying those weeks that begin in that month, or the total amount may be paid at the beginning of the summer. A 5% discount will be given if the entire summer amount is paid at the beginning of the summer session.

I, _____, parent or guardian of the above named student, agree to the conditions and regulations as set forth herein. I further agree to pay all bills as they become due. The parent or guardian, in signing this contract, agrees that the student will be held responsible for adhering to the rules of the school. I also understand that **Registration/Supply Fees are non-refundable.**

Signature of Parent or Guardian
financially responsible for student.

Spouse

SS# _____

SS# _____

Address _____ Zip _____

Date _____

_____ I give permission for my home phone number and address to be given out if it is requested by the parents of a classmate.

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My child, _____, will not attend summer camp 2019.

Parent Signature