

Parent/Guardian Signature

Before and After School Care Enrollment Form

Available to students in PS - 4th grade

Before School hours are from 7:45 to 8:30 a.m. and After School hours are from 3:15 to 5:30 p.m. Crossings Christian School, 14400 N Portland Avenue, Oklahoma City, OK 73134, Fax 405-767-1520

Student Name: (First/Middle/Last)			GRADE
Stadent Name. (11134) Middley Edsty			GIADE
Parent/Guardian Name(s)			
Address			
Home Phone ()	Bus. Phon	e ()	Cell Phone ()
	BEFORE & AFTER SCI	HOOL CARE OPTIONS	
	Please indicate the op	tion you are choosing	
	Before & After School Care	Annual Fee	
	☐ 1 day per week	\$495.00	
	☐ 2 days per week	\$989.00	
	☐ 3 days per week	\$1,437.00	
	☐ 4 days per week	\$1,976.00	
	☐ 5 days per week	\$2,471.00	
	Before School Care	. ,	
	Only		
	☐ 1 day per week	\$153.00	
	☐ 2 days per week	\$308.00	
	☐ 3 days per week	\$460.00	
	☐ 4 days per week	\$613.00	
	☐ 5 days per week	\$765.00	
	After School Care		
	Only		
	☐ 1 days per week	\$341.00	
	☐ 2 days per week	\$681.00	
	☐ 3 days per week	\$1,022.00	
	☐ 4 days per week	\$1,363.00	
	☐ 5 days per week	\$1,706.00	
Payments may be made in full directly to All classes and programs offered are cont NOTE: If a family falls behind in paying exof fees. Space will be at risk unless the act attendance. Late fees are \$3.00 per minu will be withdrawn from the program.	Crossings Christian Schoolingent upon sufficient en tended care fees, their chooling temains current. Al	ol or through FACTS tuition rollment. nildren will be withdrawn. Il fees are due on a montl	n program by ACH draw or credit card. Re-enrollment is subject to full payment by basis regardless of the child's

Date