



Dear Club Family,

We are excited to have you join us at the Boys & Girls Club Early Childhood Education Program for the 2018/2019 school year! We will be offering great programs that will ensure a fun filled, exciting summer & school year! All programs that will be offered are listed below:

2018 Summer ECE Program:

This program will focus on impactful half-hour programs for youth that are enrolled. Along with fun activities, youth will get the opportunity to go on field trips and participate in outdoor programming.

- Monday – Friday program
- 7:30 am – 6 pm
- \$1,500 Summer Tuition
 - Pay in Full or Monthly payment options available.
 - \$1,500 Pay in Full / \$500 Monthly
- **Must be age three** by first day of attendance
- Child must be potty-trained

Full Day Preschool & Junior Kindergarten School Year Programs:

Preschool & Junior Kindergarten classrooms are a safe, positive place that provides a learning environment with low classroom ratios to foster all areas of development. Unique features to our full day Preschool & Junior Kindergarten curriculums include prepared hot lunch, art class three times per week, gym class three times per week and weekly visits from Mrs. Katherine from the Brookings Public Library. The goal of these programs are to ensure that youth are socially, emotionally and academically prepared for Kindergarten.

- Follows the Brookings School District Calendar
- 8:15 am-3:22 pm Monday – Friday (Wednesday is an early dismissal at 2:22 pm)
- Early drop-off available at 7:45 am
- \$4,050 School Year Tuition
 - Annual, Semester or Monthly tuition payment options available.
 - \$4,050 Annually / \$2,025 per Semester / \$450 Monthly
- **Must be age four** by September 1st to enroll
- Child must be potty-trained
- Seamless transition to Continued Education option until 6 pm (more details on next page)

Morning Half Day Preschool School Year Program:

Our morning half day preschool program provides youth the opportunity to thrive in an educational setting that focuses on social, emotional and academic development. Unique features to our morning half day preschool program include early drop off available to parents at 7:45am, as well as transportation from the morning preschool program to their daycare facility or home after preschool ends each day.

- Follows the Brookings School District Calendar
- Monday – Friday
- 8:15 am – 11:30 am
- Early drop off available at 7:45 am and must be picked up by 11:30 am
- \$1,800 School Year Tuition ***without transportation***

- Annual, Semester or Monthly Tuition payment options available.
\$1,800 Annually / \$900 per Semester / \$200 Monthly
- \$2,250 School Year Tuition **with transportation** provided from the preschool program to the child's daycare facility or home. Spots are limited to 14 on a first come, first serve basis for transportation.
 - Annual, Semester or Monthly tuition payment options available.
\$2,250 Annually / \$1,125 per Semester / \$250 Monthly
- **Must be age three** by September 1st to enroll
- Child must be potty-trained

Afternoon Half Day Preschool School Year Program:

Our afternoon preschool program provides youth the opportunity to thrive in an educational setting that focuses on social & emotional as well as academic development. A unique feature to our afternoon half day preschool program is the opportunity for members to attend Continued Education after the preschool program dismisses until 6 pm. The Boys & Girls Club afternoon half day preschool program has also developed a relationship with Head Start. Youth who are enrolled in the morning Head Start Preschool program will be fed lunch and transported to the Boys & Girls Club to attend the afternoon half day preschool program.

- Follows the Brookings School District Calendar
- Monday – Thursday
- 12:30 pm – 3:22 pm (2:22 pm on Wednesdays)
- \$1,260 School Year Tuition
 - Annual, Semester or Monthly tuition payment options available.
\$1,260 Annually / \$630 per Semester / \$140 Monthly
- Continued Education option available until 6 pm (more details below)
- **Must be age three** by September 1st to enroll
- Child must be potty-trained

Continued Education School Year Program:

The Continued Education program is open to all youth who are enrolled in our full day Preschool & Junior Kindergarten classrooms, Afternoon Half Day Preschool program, as well as all Kindergarteners. The program begins as soon as the school day ends and continues through 6 pm, Monday - Friday.

On non-school days that are observed by the Brookings School District, Continued Education is open from 7:30 am – 6 pm. These days are an additional \$25 per day and sign-up is required.

- Follows the Brookings School District Calendar
- Monday – Friday program
- Afterschool until 6 pm
- Kindergarten youth are bussed from the schools to the Early Childhood Education Center
- \$900 School Year Tuition
 - Annual, Semester or Monthly Tuition payment options available.
\$900 Annually / \$450 per Semester / \$100 Monthly
- Additional \$25 a day when your child attends on non-school days
- Child must be potty-trained

Registration:

To register, complete the enclosed membership application. Attach a voided check or credit card information, \$100 deposit to reserve your child's place and up to date immunization records. The application must be completed in entirety and the immunization record, deposit and voided check must be attached before the membership will be processed. Deposits are non-refundable. Information on orientation and open house(s) will come in your welcome packet.

Scheduling:

If your child is not planning to attend, please notify the ECE Program Director for safety and ratio reasons. However, even if your child doesn't attend, you will still be billed for that day as billing occurs monthly. A two week written notice, prior to the 16th billing date for upcoming month, must be given for withdrawing a child from the Early Childhood Education program. When a child is withdrawn with less than two weeks written notice, your account will still be charged the monthly fee.

Payment:

BGC prefers electronic withdrawal or credit card payment; however, cash/check is an option. Due to the administration of cash and check payments, the monthly payment increases by \$25.

Fees:

- \$100.00 non-refundable deposit is required upon registration to reserve a spot for your child. The deposit will be applied to the first month of tuition.
- Below is the total tuition for each program. A reminder that all amounts below increase by \$25 each month if choosing to pay by cash or check.
 - Summer Continued Education program: \$1,500
 - Full day Preschool & Junior Kindergarten: \$4,050
 - Half day Morning Preschool: \$1,800 without transportation
 - Half day Morning Preschool: \$2,250 with transportation
 - Half day Afternoon Preschool: \$1,260
 - Continued Education: \$900

Adding or Changing Programs:

If your child is adding or changing a program that has a higher tuition (for example: going from half day to full day), you will need to pay the cost difference with cash or check at the time the program is changed and complete the program change form, or wait until the next billing cycle to make the change by filling out the program change form.

Billing:

Billing will take place monthly, prior to participation, on the 16th of each month. The first bill for the summer will be due/withdrawn on May 16th (covering May 16th-June 15th). The first bill for the school year will be due/withdrawn August 16th (covering Aug 16th-Sept 15th).

Receipts will be emailed. Below are additional details about billing.

- There is no credit given for absences due to vacations, illnesses, or holidays. The Boys & Girls Club does not pro-rate or give refunds. A program change form must be completed two weeks prior to the 16th billing date for the upcoming month to withdraw a child from the Early Childhood Education program. When a child is withdrawn within the two weeks after the written notice was submitted, you will be charged the rate that you were originally signed up for.
- On days that the Brookings School District is closed (holidays and snow days), Continued Education will be open from 7:30 am until 6 pm. On these days, a \$25 fee will be added to your monthly fee that is due on the 16th of each month. Unlike monthly payments, due the month prior, holiday and no school day fees will be withdrawn from your account the following month. For

these full days, parents must sign their child up for the no school day one week in advance to ensure we have the appropriate amount of staff for the day. Once signed up, a written notice must be given two full business days prior to the date to the Boys & Girls Club if the child is no longer going to attend the full day. If a two full business day written notice is not given, the \$25 charge will still be applied to the next billing cycle.

We are very excited about having your child in the program and the high level of quality programming and staff that the ECE programs will be offering this summer & school year. Thank you for allowing The Boys & Girls Club of Brookings the privilege of working with you and your family! For additional questions, please contact Chad Vossekuil.

Chad Vossekuil
Brookings Unit Director
cvossekuil@greatfuturesd.org
605-692-3333

or

Devin Hudelson
Early Childhood Education Director
dhudelson@greatfuturesd.org
605-692-3333



BOYS & GIRLS CLUB OF BROOKINGS



Important Monthly Billing Information:

- \$100.00 non-refundable deposit is required upon registration to reserve a spot for your child. The deposit will be applied to the first month of tuition. This is nonrefundable if you choose to withdraw from the program.
- As a licensed facility, the Early Childhood Education program accepts Childcare Assistance as a form of payment.
- The Boys & Girls Club of Brookings bills monthly, the month prior to services. For example, the first summer payment will be withdrawn on May 16th for May 24th – June 15th. For the school year, the first payment will be withdrawn on August 16th for August 22nd – September 15th. The month begins on the 16th and ends on the 15th. If the 16th falls on a weekend or a holiday, funds will be withdrawn on the following business day.
- Funds will be withdrawn from all accounts that are signed up for automatic withdraw on the 16th each month. Families who choose to pay by check or cash, payments are due on the 16th to the Business Department (1126 Southland Lane). A late charge of \$25 will be charged to your account if payment is not made by the 16th.
- If an EFT (Electronic Funds Transfer) charge does not go through, you will be responsible for paying the bank fee as well as the \$25 to the Boys & Girls Club for a late payment. If an EFT is not set up and the Boys & Girls Club has not received your payment by the last day of the month and it is the second time having a late payment, your family will be required to set up with EFT.
- A late pick-up fee (\$10.00 per 15 minute increments beginning at 3:30 pm Monday, Tuesday, Thursday, Friday and 2:30pm on Wednesday for Preschool/JK and 6:00 pm for Continued Education; morning preschool late charge begins at 11:45) will be charged beginning one minute after the end time listed above for the program you are enrolled in and continuing until your child is picked up from the program.
- There is no credit given for absences due to vacations, illnesses or holidays. The Boys & Girls Club does not pro-rate or give refunds.
- Two week written notice prior to the 16th billing date for upcoming month must be given for withdrawing a child from Boys & Girls Club ECE Program. When a child is withdrawn with less than two weeks' notice, you will be charged the rate that you were signed up for.
- On days that the Brookings School District is closed (holidays and snow days), Continued Education will be open from 7:30 am until 6 pm for youth who are enrolled in the Continued Education program. On these days, the fee will be a \$25 charge added onto your monthly fee that is due on the 16th of the following month. Unlike monthly payments, due the month prior, full-day fees will be withdrawn from your account, after your child has attended. For these full days, parents must sign their child up for the full day one week in advance to ensure we have the appropriate amount of staff for the day. Once signed up, a written notice must be given two full business days prior to the date to the Boys & Girls Club if the child is no longer going to attend the full day. If a two full business day written notice is not given, the \$25 charge will still be applied to the next billing cycle. No exceptions will be made.

Membership Registration Checklist:

GREAT FUTURES START [HERE](#).



Below is a quick overview of what needs to be filled out before handing in your child's membership packet.

For membership to be accepted, approved and youth able to attend, the application must be completed in its entirety-thank you!

Page 6:

- ☐ Program(s) marked (JK/Preschool , Continued Education and/or Summer Program)
- ☐ Youth's Sibling's Information
- ☐ Income Information
- ☐ Parent Guardian Information (Address, Phone Numbers, E-mail, Place of Employment)

Page 7:

- ☐ Youth Information (Name, DOB, Gender, Ethnicity, Number in Household, School Information)
- ☐ Medical Information
- ☐ Name and phone number of child's physician
- ☐ Additional Emergency Contacts (at least two that are not parents/guardians)

Page 8:

- ☐ Individuals not allowed to pick up youth
- ☐ Mark "Yes/No" for each question in box
- ☐ Permission Information (Yes/No/Not Applicable and Initials)

Page 9:

- ☐ Release Form

Page 10:

- ☐ All About Me sheet

Pages 11 & 12:

- ☐ EFT Form for Automatic Withdrawal or for checking or savings account
- ☐ EFT Form for Automatic Withdrawal or for credit card

Please attach to application:

- ☐ \$100 deposit required (attach to application) at the time of signing up for the program
- ☐ Current immunization record attached

Membership Registration Checklist:

GREAT FUTURES START [HERE](#).



***Annual Immunization records must be attached.**

This applies to renewal applications, even if no changes have occurred.

IMMUNIZATION REQUIREMENTS

Immunizations shown in more than one age category are required within that shown time range.

Required Vaccine	Birth	1 Mo	2 Mo	4 Mo	6 Mo	12 Mo	15 Mo	18 Mo	24 Mo	4-6 Yr
Hepatitis B (Hep B)	#1	#2			#3					
Diphtheria, Tetanus, Pertussis (DTP)			#1	#2	#3		#4			#5
Haemophilus influenzae Type b (Hib)			#1	#2	#3	#4				
Inactivated Poliovirus			#1	#2	#3					#4
Measles, Mumps, Rubella (MMR)						#1				#2
Varicella (Chicken Pox)						#1				
Pneumococcal (PCV)			#1	#2	#3	#4				
Hepatitis A (Hep A)						2 doses, 6 mo. apart				



1126 Southland Lane, Brookings SD 57006
Tel 605-692-3333 Fax 605-692-9199
www.greatfuturesd.org

ECE MEMBERSHIP APPLICATION

OFFICE USE ONLY

Membership Number:	Orientation Date:	Payment Type: _____ Amount\$ _____
New Member / Renewal:	Card Printed Date:	Receipt #: _____ Check # _____
Entered By: _____ Date: _____	Photo Taken Date:	Accepted By: _____ Deposit Date: _____
Earliest Start Date:	Applying for CCA: Yes No (circle)	CCA Letter: Approved Disapproved (circle)
Expiration Date: 5/25/2019	Welcome Email Date: Letter and Magnet Sent Date:	Location Accepted:

*If no deposit attached, please list why on a separate form and attach

Please mark the programs and program options for which you are applying:

**All amounts below increase by \$25 each month if choosing to pay by cash or check.*

- ☐ **2018 Summer ECE program** (child must be 3 years of age by first day of summer) \$1,500 Tuition (\$500/month)
 - ☐ **May 24 - August 21 (All Summer) or**
 - ☐ **May 24 - June 16** ☐ **June 17 - July 16** ☐ **July 17 - August 21**
 - Full day, 5 days a week from 7:30 am – 6 pm
- ☐ **Junior Kindergarten** (child must be 5 years of age by September 1st) \$4,050 Tuition (\$450/month)
 - Full day, 5 days a week from 7:45 am (early drop off option) until 3:22 pm(2:22 pm on Wednesdays)
- ☐ **Full Day Preschool** (child must be 4 years of age by September 1st) \$4,050 Tuition (\$450/month)
 - Full day, 5 days a week from 7:45 am (early drop off option) until 3:22 pm(2:22 pm on Wednesdays)
- ☐ **Morning Half Day Preschool** (child must be 3 by September 1st)
 - ☐ **With Transportation** \$2,250 Tuition (\$250/month) **or**
 - ☐ **Without Transportation** \$1,800 Tuition (\$200/month)
 - 5 days a week from 7:45 (early drop off option) to 11:30 am
- ☐ **Afternoon Half Day Preschool** (child must be 3 by September 1st) \$1,260 Tuition (\$140/month)
 - Monday – Thursday 12:30 pm – 3:22 (2:22 pm on Wednesdays)
- ☐ **Continued Education** (afterschool care until 6 pm) \$900 Tuition (\$100/month)
 - After school until 6 pm; open on non-school days for an extra \$25 a day

ECE MEMBERSHIP APPLICATION

Youth First Name: _____ Youth Last Name: _____

Member's Sibling(s):

Name	Age	Ful/Half/Step	Name	Age	Full/Half/Step
_____			_____		
_____			_____		

Circle the Appropriate Annual Household Income (this is for grant purposes only)

0-\$37,700	\$37,701-\$43,100	\$43,101-\$48,500	\$48,501-\$53,850	53,851-\$58,200
\$58,201-\$62,500	\$62,501-\$66,800	\$66,801-\$71,000+		

Parent/Guardian Information: *Both parents/guardians information needs to be filled in below:*

Parent/Guardian (Primary Club Contact): _____ Gender: M F

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email (at least one email is required to be on file): _____

Place of Employment: _____

☐ *If single parent, please check this box*

Parent/Guardian: _____ Gender: M F

Address: _____ City: _____ State: _____ Zip: _____

☐ Check this box if home address is same as above

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____

Place of Employment: _____

Youth Information:

First Name: _____ Middle: _____ Last: _____

Age: _____ Date of Birth: _____ Gender (circle): M F

Number in Household: _____

Ethnicity (circle):

African American

Asian

Caucasian

Hispanic

Multi-Racial

Native American _____ (Tribe)

Native Hawaiian/Pacific Islander

Other

Academic information:

School: _____ Grade: _____ School Year: _____

Anticipated Graduation Year: _____

Teacher _____

Is your child on an Individualized Education Plan or 504? ___ Yes ___ No

Does your child have a specific academic need? ___ Yes ___ No If yes, please explain:

Medical Information:

Does your child have asthma? ___ Yes ___ No

Do they use/carry an inhaler? ___ Yes ___ No ___ N/A

Does your child have an allergy? ___ Yes ___ No

If yes, please list allergy and associated symptoms:

Allergy _____ Symptom(s): _____

Allergy _____ Symptom(s): _____

Allergy _____ Symptom(s): _____

Allergy _____ Symptom(s): _____

Does your child have other medical conditions or diagnoses? ___ Yes ___ No If yes, please explain:

Medications: ___ Yes ___ No If yes, please list medication and time(s) administered:

Medication Name _____ Time(s) administered: _____ AM/PM

Medication Name _____ Time(s) administered: _____ AM/PM

Medication Name _____ Time(s) administered: _____ AM/PM

Medication Name _____ Time(s) administered: _____ AM/PM

Please check one item from each group below:

Single Parent: ___ Yes ___ No

Is the member a child of Military personnel and not living on a base? ___ Yes ___ No

Are you willing to volunteer at the Club? ___ Yes ___ No

Qualify for Free Lunch: ___ Yes ___ No

Qualify for Reduced Lunch: ___ Yes ___ No

Additional Emergency Contacts (in addition to Parents/Guardians):
****MUST HAVE AT LEAST 2 CONTACTS****

First Name: _____ Last Name: _____ Phone Number: _____ City, State: _____ Relation to the Child: _____	First Name: _____ Last Name: _____ Phone Number: _____ City, State: _____ Relation to the Child: _____
First Name: _____ Last Name: _____ Phone Number: _____ City, State: _____ Relation to the Child: _____	First Name: _____ Last Name: _____ Phone Number: _____ City, State: _____ Relation to the Child: _____

Please write below if someone is

NOT ALLOWED TO PICK UP MEMBER

If a biological parent, legal documentation must be provided.

Name: _____ Relationship to Member: _____ Does this contact live in the Member's household? Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] (If not, please fill in address below) City/State/Zip: _____ Brief description of individual: _____ _____	Name: _____ Relationship to Member: _____ Does this contact live in the member's household? Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] (If not, please fill in address below) City/State/Zip: _____ Brief description of individual: _____ _____
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Permission Information

I give my permission to the Boys & Girls Club of Brookings and my child's school to exchange information regarding the minor child listed on this application. The purpose of the exchange is to help both organizations do a better job of helping the student be successful in school, in the Boys & Girls Club and in life. This release is valid for one year and may be revoked at any time by contacting Brookings Community Schools or the Club in writing.

____ Yes ____ No

Parent Signature

I give permission for my child's picture, moving pictures, or any other graphic depiction or likeness, to be used by the Boys & Girls Club and its activities.

Initials

RELEASE FORM

I, the parent/guardian of the minor child listed on this application, for ourselves, our heirs, executors and administrators, hereby release, waive, acquit and forever discharge the Boys & Girls Club of Brookings Corporation, and Boys & Girls Clubs of America, their representatives, successors, insurers, assigns or any other person or entity associated with any of the above organizations such as staff, directors or volunteers, from all liability, claims, demands, or causes of action for any and all loss, damage, injury or death and any claim of damages resulting from use of facilities owned or controlled by the above organizations, or participation in activities of said organizations either at or away from the Club.

Medical Treatment

I give permission to the Boys & Girls Club of Brookings to seek emergency medical treatment for my minor child if I cannot be reached. I understand that Club employees cannot transport children to the hospital and that if a life threatening situation occurs, the AMBULANCE will be contacted first and then the PARENTS. I will be responsible for any/all costs of medical attention and treatment.

Surveys and Questionnaires

I, the parent/guardian of the minor child listed on this application, give permission for Boys & Girls Club of Brookings to survey my child about his or her Club experience and behaviors, skills and attitudes using Boys & Girls Clubs of America's Youth Development Outcome Measurement Tool Kit surveys or other survey instruments.

Restraining

I understand that when a youth is in a dangerous situation to themselves or others they will be removed from the situation.

Miscellaneous

I understand that the Boys & Girls Club is not responsible for lost or stolen items. Any items placed in the lost and found will be discarded on the 15th of every month.

Late Fees

I understand that my child/children must be picked up by closing time each day. I understand that I will be charged \$10.00 per child for every 15 minutes that my child/children remains at the club after closing time. Time is rounded up to next 15 minutes. For example:
1-14 minutes that child/children remain at the club after closing time = \$10.00 per child
15-29 minutes that child/children remain at that club after closing time = \$20.00 per child, etc.

I have read the completed application and this form, understand the rules of the Boys & Girls Club and request that my child be admitted into membership.

I hereby give my permission for my child to become a member for the Boys & Girls Club of Brookings. I understand that the Club is Not Responsible for the time or manner in which he/she may arrive at or leave the Club, and that the Boys & Girls Club of Brookings and its property are not responsible for personal injury or loss of property.

Parent Signature:

Date:

****Please attach copy of current immunization record****

This requirement also applies to renewal applications, even if no changes have occurred.

All About Me!

Parent/Guardian: please fill this section out with your child

Has your child been in a daycare or preschool setting before? Yes No

Are there any holidays that you prefer your child not celebrate? Yes No

If yes, please list _____

Is your child an English Language Learner (ELL)? Yes No

Is there anything else you would like to share with the Clubhouse about your child?

Parent/Guardian: please fill this section out with your child

My name is: _____ I like to be called:

I am _____ years old.

The members of my family are:

Some of my favorite things to do are:

Sometimes I get scared when:



BOYS & GIRLS CLUB OF BROOKINGS



AUTHORIZATION FOR MONTHLY PAYMENT BY CHECKING OR SAVINGS ACCOUNT

I authorize The Boys & Girls Club of Brookings, SD, Inc. to initiate debit entries to my account indicated below.
I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

Name – Please Print

Youth's Name – Please Print

Address – Please Print

Phone Number

Name of Financial Institution

Address of Financial Institution – Street, City, State and Zip Code

Checking or Savings Account # _____

Bank Routing Number # _____

Payment Amount \$ _____

Tuition Payment Schedule: (please select one) Pay in Full / Per Semester / 9 Equal Monthly Payments

- ☐ I qualify for Child Care Assistance but would like this retained as a backup payment.
- ☐ I would like to pay in cash or check each month (Reminder: additional fee of \$25 will be added each month)

Payments will be debited on the 16th day of the month.

***Reminder, full non-school days are an additional \$25 per day cost.
If your child is signed up but does not attend, you will still be charged.***

****PLEASE ATTACH A VOIDED CHECK AND THE \$100 DEPOSIT****

This authorization will remain in effect until the total payment amount has been debited or until I notify you in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my bank or the Boys & Girls Club of Brookings up to five business days prior to my account being charged. I understand that there may be a fee charged by my financial institution for any stop payment I authorize. I understand that the amount I have authorized may vary with the guidelines stated here, and I will be notified at least 10 days prior to the transfer if that amount falls outside of these guidelines. I understand that choosing monthly contributions will move the ACH transaction to the nearest working day, should that date occur on a holiday, weekend, or any other non-working day for the banking institution.

Name (please print)

Signature

Date



**BOYS & GIRLS CLUB
OF BROOKINGS**



**AUTHORIZATION FOR MONTHLY PAYMENT BY CREDIT CARD ACCOUNT
*VISA / MASTERCARD ONLY***

**I authorize The Boys & Girls Club of Brookings, SD, Inc. to charge my credit card number indicated below.
I acknowledge that the transactions must comply with Visa/MasterCard regulations.**

Name on Card – Please Print

Youth's Name – Please Print

Address – Please Print

Phone Number

Credit Card Account Number

Expiration Date

CVS Code

Payment Amount \$

Tuition Payment Schedule: (please select one) Pay in Full / Per Semester / 9 Equal Monthly Payments

- ☐ I qualify for Child Care Assistance but would like this retained as a backup payment.
- ☐ I would like to pay in cash or check each month (Reminder: additional fee of \$25 will be added each month)

Payments will be debited on the 16th day of the month.

***Reminder, full non-school days are an additional \$25 per day cost.
If your child is signed up but does not attend, you will still be charged.***

This authorization will remain in effect until the total contribution has been charged to my account or until I notify you in writing to cancel it in such time as to afford The Boys & Girls Club a reasonable opportunity to act on it. I can stop any transaction by notifying The Boys & Girls Club up to five business days prior to my credit card being charged. I understand that choosing monthly contributions will move the transaction to the nearest working day, should that date occur on a holiday, weekend, or any other non-working day for the banking institution.

Name (please print)

Signature

Date