REGULAR PROGRAM

Girls Inc. of Johnson County Summer Program Enrollment Financial Agreement

Program Hours 9:00 a.m.– 6:00 p.m.

Financial Terms and Conditions

Child's Name:_____ Child's Grade Next School year:_____

I understand that my tuition is based upon this agreement as completed below. I agree to pay the total tuition designated in this contract. Your account must be paid on time or placement could be jeopardized. **WEEKLY FEES MUST BE PAID EVEN IF YOUR CHILD IS NOT PRESENT. NO REFUNDS.**

Summer Camp is 11 weeks - May 24th – August 5, 2016

Please choose ONE payment plan that works best for your family:

☐ 10 Payments of $50

Payment Schedule:

May 11, 2016
May 16, 2016
May 23, 2016
May 31, 2016
June 6, 2016
June 13, 2016
June 20, 2016
June 27, 2016
July 5, 2016
July 11, 2016

☐ Daily Payments - $12

I have received, read, and understand the information contained in the Girls Inc. of Johnson County Summer Program Enrollment agreement. I agree to the terms and conditions set forth including fees calculated in this agreement. Dates may be added but dates may **NOT** be removed once contract is signed. **NO REFUNDS WILL BE GIVEN AT ANY TIME.**

Parent Signature:_____ Date:_____

Office Manager Signature:_____ Date:_____

I understand that a late fee of $1.00 per minute will be assessed after 6:03 pm. Abuse of this policy will result in termination from the program. Parents initial_____

I understand Girls Inc. will be closed on Monday, 5/30/16 in observance of Memorial Day and 7/1/16 and 7/4/16 for Independence Day. Parents Initial _____