

Husky House Inc.

1st through 5th Grade Childcare Application for 2018-2019 School Year

Child's Last Name _____ **First Name** _____ **Grade in '18-'19** _____
(Please, only 1 child per form – Thank You!)

Guardian's Name _____ **Phone #** _____ **Email** _____

PLEASE NOTE:

- In order to maintain quality of program and staff, priority in registration is given to families who use Husky House year-round, full time (Monday-Friday). Year-round includes school year (August through June) and a minimum of three full-day weeks (or equivalent) of our summer program.
- Other factors which will be taken into account in determining priority for available spaces will include the number of hours needed each week, whether the child is a returning child, has siblings in the program, and the order in which applications are submitted.
- Please mark the time blocks for each day that you would like your child to attend.
- For each time block, count the number of days you are using and carry the rate down into the "Totals" column.
- Sibling discount should only be applied to the 2nd and 3rd (etc.) child(ren) using the fewer number of hours.

Time Blocks→	7:30 – 8:15		2:42 – 4:00		2:42 – 5:00		2:42 – 6:00	
Monday								
Tuesday								
Wednesday <small>*add an extra \$42 for early dismissal if using fewer than 5 days*</small>			*		*		*	
Thursday								
Friday								
Monthly Rates→ <small>("days" are per week)</small>	1 day	\$43	1 day	\$54	1 day	\$93	1 day	\$129
	2 days	\$83	2 days	\$104	2 days	\$179	2 days	\$255
	3 days	\$123	3 days	\$153	3 days	\$263	3 days	\$376
	4 days	\$152	4 days	\$190	4 days	\$327	4 days	\$467
	5 days	\$188	5 days	\$235	5 days	\$400	5 days	\$570
TOTALS:	\$ _____		\$ _____		\$ _____		\$ _____	

TOTAL: Please add up your totals according to the time blocks chosen above and carry amounts down

_____ **Total of all time blocks = Monthly Tuition**

_____ **Deduct 10% sibling discount if this is 2nd or 3rd child with equal or fewer hours**

_____ **Sub-Total**

_____ **+ \$75.00 Non-Refundable Materials Fee Per Child**

= \$ _____ **GRAND TOTAL**

I agree to pay tuition in advance of each month based on the requested schedule above and according to the "Enrollment Agreement". This schedule will remain effective each month UNLESS I submit a request to change my child's schedule by the 15th of the preceding month (which requires a \$15.00 fee).

Guardian Signature _____ **Date** _____

Return this Registration Application to Husky House OR Mail to: Husky House, PO Box 839, Lafayette, CA 94549

Call us with questions at (925) 283-7100

OFFICE USE ONLY:							
Approved/Declined	Called	Posted	Inv./Amt.	Paid	Lic Forms on File	Date Rc'd	