



**MUNSON HEALTHCARE**  
*Paul Oliver Memorial Hospital*  
**PAUL OLIVER ENRICHMENT PROGRAM**  
**Crystal Lake Elementary**  
**Enrollment Contract**  
**2010-2011**

Paul Oliver Enrichment Program is a Before/After School Enrichment Program, located at Crystal Lake Elementary. This program is licensed by the State of Michigan Department of Human Services, and service 4-12 year olds.

**Hours of Operation:**

A.M. Session-7:00 a.m.-9:00a.m.  
 P.M. Session (K-5<sup>th</sup> grade) 4:00 p.m - 6:00 p.m.  
 Half-day care - When released from class until 6 p.m.  
 Full-day care - 7:00 a.m. to 6:00 p.m.

**Paul Oliver Enrichment Program Enrollment:**

Below is a registration form, please fill it out completely and return it to the Lead Teacher or the school office. Enrollment is open on a first come first serve basis. A \$20.00 per child enrollment fee is due upon registration. The application and enrollment fee will secure a spot for your child.

**Paul Oliver Enrichment Program Fees:**

Fees are billed to parent's bi-weekly. You are billed for the days that your child attends. Please note, there is a separate charge for half days, snow days or no school days. Please phone to communicate any changes to your schedule, such as needing additional services, not needing services on a day your child was scheduled, or changes to the dates of service. Changes in schedule will be made on a first come basis, and will be accommodated as space allows. **If payment goes delinquent beyond two weeks, your child will not be able to attend the program until payment is paid in full.**

<u>Fees</u>		
A.M. or P.M. Sessions	A.M. & P.M. Session	Half Day
1 Child - \$5 / session	1 child - \$8 / day	1 Child - \$15
2 Kids - \$9.50 / session	2 Kids - \$15 / day	2 Kids - \$28
Each addt'l - \$3 / session	Each addt'l - \$7	Each addt'l - \$10
<b>Full Day – 1 Child \$20; 2 Kids \$38; Each addt'l child \$10</b>		
***Snow delays \$3.00 per hour additional charge		
<b>Annual Enrollment Fee \$20 per child for the school year</b>		

Parent's Name: \_\_\_\_\_ Address: \_\_\_\_\_

Child/ren name: \_\_\_\_\_

Child's grade and Teachers name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Parent's Work Phone: \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_