



KidsArts! After School Day Program
Jamaica Plain Multicultural After School Arts Program
 P.O. Box 301252
 Jamaica Plain, MA 02130

ENROLLMENT FORM

p. (617) 524-0818
f. (617) 524-4042
www.jpkidsarts.org

(Please Complete One Form Per Child)

Child's Name: _____ Birth date: _____

Address/City/Zip: _____ Phone No.: _____

School as of 9/10: _____ Grade as of 9/10: _____

Parent/Guardian 1: _____ Email: _____

Address/City/Zip: _____

Phone Home: _____ Work: _____ Cell/other _____

Parent/Guardian 2: _____ Email: _____

Address/City/Zip: _____

Phone Home: _____ Work: _____ Cell/other _____

2. Do you have a child care voucher? YES NO

Please check which day(s) your child will be attending:

<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday	<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday
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After School Rates (rate is per Month, based on number of days child attends):

- 2 days/week... \$177 per month
- 3 days/week... \$253 per month
- 4 days/week... \$329 per month
- 5 days/week... \$375 per month

3. Payment Enclosed: \$ _____

Payment: All fees must be paid in full at time of registration. Credits or transfers for vacation days will only be given if five (5) business days notice is given less 25% administration fee. For vouchers, parents must present paperwork that has been issued that states full day coverage at time of registration.

Parent/Guardian Signature _____ Date _____

Office Use Only
 Date Enrolled: _____ Payment rec'd: _____ Payment Due: _____