



St. Mary's French Immersion
 Before and After
 School Program
 124 Gibb Street
 Sault Ste. Marie, ON
 705.206.9522



St. Mary's French Immersion YMCA Before and After School Program

FEE STRUCTURE

PROGRAM	AGE	RATE
Before & After Program	JK - 12 years	\$20.80
Before OR After School Program	JK - 12 years	\$12.50

- Fees are calculated based on the number of days per month your child is enrolled. There are no deductions provided for absences. **All absences must be paid in full.**
- Please be advised that children must be enrolled a minimum of two days per week. Changes require a two week notice. These days must be the same every week.
- ChildCare fees are paid by Pre-authorized Payments. Please provide either a void cheque or credit card information at the time of registration.
- The YMCA ChildCare offers reduced fees when enrolling two or more children.
- There is a 5% fee reduction in ChildCare fees for YMCA Family/Adult members. Please inform the ChildCare manager if you are a Family or Adult Member.
- The YMCA will initiate collection proceedings to collect unpaid accounts.
- If you are delayed beyond regularly scheduled program hours, a supplementary fee of \$5.00 for every fifteen minutes will be charged to your ChildCare account.

Contact:
 Marlene Miskiw
 Manager of ChildCare and
 Children's Services
 705.206.9522
 allyson.pazdrak@ssmymca.ca

Building healthy
 communities

St. Mary's French Immersion YMCA Before and After School Registration

Child's Name:	_____	Date of Birth:	_____
Address:	_____	Postal Code:	_____
Telephone No.:	_____		
Name of Mother (Guardian):	_____	Email:	_____
Address:	_____	Telephone No.:	_____
Place of Employment:	_____	Telephone No.:	_____
Name of Father (Guardian):	_____	Email:	_____
Address:	_____	Telephone No.:	_____
Place of Employment:	_____	Telephone No.:	_____

Before/After School Programs:	J.K.	S.K.	Grade	Before: __	After: __
Mon _____	Tues _____	Wed _____	Thurs _____	Fri _____	
School : _____			Bus #: _____		

YMCA Family/Adult Member: Yes No Subsidy Requested: Yes No

Signature: _____ Date: _____

Payment

Please provide either a void cheque or credit card information at the time of registration.

Office Use Only:

Date of Submission:	_____	Date of Discharge:	_____
Start Date:	_____		