

Child Care Rates 20__ - 20__

Registration Fee:

	Infant	Toddler	2 Year Old	Preschool 3	Preschool 4	Preschool 5	School Age	Special Needs
<i>Full Time Weekly Rate</i>								
<i>Part Time Weekly Rate</i>								
<i>VPK Full Time Weekly Rate</i>								
<i>VPK Part Time Weekly Rate</i>								
<i>School Age After School Weekly Rate</i>								
<i>School Age Before School Weekly Rate</i>								
<i>School Age Before or After School Weekly Rate</i>								
<i>School Readiness Differential Fee</i>								

School Readiness Parent Co-Payment: _____ x5 = Co-Payment Weekly Fee: _____

Co-Payment Weekly Fee: _____ + Differential Fee: _____ = Weekly Rate: _____

Child: _____

Parent Signature: _____ Date: _____