



2023-2024 ACT AFTER SCHOOL APPLICATION

ACT Programs | 1047 Amsterdam Ave | (212) 316-7530 | act@stjohndivine.org

HOUSEHOLD INFORMATION

5 years of age as of December 31st, 2023 (Kinder-5th graders)

We escort/pick up from Cathedral School, PS 165, and 110-111th Street Amsterdam Ave-east side of the block.

Child's Name: _____ School Attending: _____

Date of Birth: _____ Gender: _____ Grade: _____ Age as of December 31: _____

Parent 1 Name: _____

Parent 2 Name: _____

Occupation: _____

Occupation: _____

Contact Number: _____

Contact Number: _____

Home Address: _____

Home Address: _____

Email: _____

Email: _____

Emergency Contact Name: _____

Relationship to Child: _____ Work Phone: _____

Email Address: _____ Cell Phone: _____

A \$35 non-refundable Mission Fee is due once per fiscal year (July 2023 to June 2024).

The **Registration Fee** must be submitted along with this application in order to be considered.

The registration fee is applied toward the annual tuition once accepted into the program, and refunded only if we cannot offer a space.

ENROLLMENT STIPULATIONS AND REQUIREMENTS

- Payment installments are due at the end of the month—we accept cash, checks, money orders and credit cards (incur a 3% fee.) Please mark your calendars to submit payments on time.
- Credit Card Auto Payment Plan is available upon request.
- Failure to comply with the payment schedule, contractual agreements or program regulations forfeits placement in any or all programs.
- All families are responsible for payment regardless of use and absences.
- **We do not prorate if starting after programs' first day nor for absences unless you were accepted off the waitlist after the program start date.**
- No refunds, credits, make-ups, substitutions, transfers or changes of days.

I, _____ (parent/guardian name), understand and agree to the terms outlined above.

Parent's Signature: _____

Date: _____



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PACKAGE OPTIONS

Age Range: 5 years of Age as of December 31st (Kinder-5th graders)

Hours: when regular school day ends until 6:00pm

All prepayments (full payment upon registration) include a 5% discount.

OPTION ONE: Full School Year: Sept 7 - June 14 when your school is in session

<input type="checkbox"/>	Prepayment: \$3,296.50	<input type="checkbox"/>	Payment Plan: \$3,470 (\$750 required with application) Oct - Feb: \$544 monthly
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Semester 1: Sept 7 - Dec 22

Semester 2: Jan 2 - June 14

Note to families applying solely for Semester One: There is no guarantee space will be available in the second semester unless you apply with the registration fee by **November 15th**.

OPTION TWO: Five Days per Week by Semester

<input type="checkbox"/>	Semester 1 Prepayment: \$1,586.50	<input type="checkbox"/>	Semester 1 Payment Plan: \$1,670 (\$500 required with application) Oct - Nov: \$585 monthly
<input type="checkbox"/>	Semester 2 Prepayment: \$2,137.50	<input type="checkbox"/>	Semester 2 Payment Plan: \$2,250 (\$500 required with application) Feb - April: \$583, \$583, \$584

OPTION THREE: Three Days Per Week by Semester

Circle Days Attending: M T W Th F

<input type="checkbox"/>	Semester 1 Prepayment: \$1,064	<input type="checkbox"/>	Semester 1 Payment Plan: \$1,120 (\$500 required with application) Oct - Nov: \$310 monthly
<input type="checkbox"/>	Semester 2 Prepayment: \$1,377.50	<input type="checkbox"/>	Semester 2 Payment Plan: \$1,450 (\$500 required with application) Feb - March: \$475 monthly

OPTION FOUR: Two Days per Week by Semester

Circle Days Attending: M T W Th F

<input type="checkbox"/>	Semester 1: \$750 (total required with application)
<input type="checkbox"/>	Semester 2: \$990 (total required with application)

Registration forms must be submitted with payment in order to be considered for space. We will not hold spaces in the program without payment. I am aware of the registration limitations and requirements stated above.

Signature: _____

Date: _____