**Better Family Life, Inc.**

**Payment Contract**

**Parent/Guardian(s) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Child(ren) Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Registration Fee:** $35/per student/$60.00 families with 2-3 children/ $85.00 families (4 or more children)

**Full Day:**  8:00 am-5:00 pm $85.00 weekly (new)/$75.00 (returning)/$65.00 (KYPE/Staff)

**Half Day**: 12:00 pm-4:30 pm $50.00 weekly (new)/$50.00 (returning)/$50.00 (KYPE/Staff)

**Before Care**: 7:30 am-8:00 am $10.00 weekly/child

**Aftercare**: 5:00 pm-6:00 pm $10.00 weekly/child

**2nd child**: $65.00 (new)/$55.00 (returning)/$45.00 (KYPE/Staff)

**3rd child+**: $45.00/child

**YLA (7th\_12th grade):** $35.00 reg. fee + $200 (one-time activity fee)

**Your weekly activity fee is** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Choice of payment plan**:  ‍󠇍 weekly 󠄋 bi-weekly

☐ I have been approved as a State Child Care Assistance recipient for Summer Camp 2023 tuition.

(You must have documentation from the Office of Childhood to complete your enrollment.)

\***Please note: Recommended form of payments are: Cash or money order. (Credit Card and Cash App services are also available.) Please notify the youth department before either method is used to ensure proper credit is applied.**

☐ I agree to the above payment plan selected for my camper(s). Payment is due at the beginning of each week. I understand and agree that I will not get behind in the payment plan that I have accepted. I understand if I do not remain current my child will be restricted from the program. I understand it is my responsibility to keep up with payment due dates and amounts due. Payments should be submitted to the BFL representative/Administrative Coordinator in accordance with the selected payment schedule.

**\* I further understand that if I become two weeks behind with my payments my camper will not be allowed to participate in or attend camp until balance is current.**

**Household income: ☐ $0 - $11, 770 ☐ $11,771- $15,930 ☐ $11,771- $15,930 ☐ $15,931- $20,090 ☐ $20,091- higher**

**Parents Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BFL Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**