

Office Use Only

Child's Name: _____
 D.O.B. (MM/DD/YYYY): _____
 Start Year: *September* _____
 Sibling(s) on Wait List: YES NO



Date Received: _____
 Received By: _____
 Check #: _____

AFTER SCHOOL ENROLLMENT DEPOSIT CONTRACT

[Please use one Deposit Contract form per child.]

I would like to enroll my child, (child's full name) _____ in Hunter Mill Country Day School's (HMCDS) After School Program (Ages 5 to 12).

I understand that HMCDS operates on the same schedule as Fairfax County Public Schools and thus each new school year begins in September and runs through June. Summer Session enrollment is handled separately.

I understand HMCDS starts their enrollment process in March and it runs through late May, for each upcoming school year. This is when most new openings occur. Priority placement may be given to siblings of preschoolers who are offered placement. HMCDS typically only takes a few new children into the after school program each year and it some years, depending on preschool enrollment, may take none.

I understand that children who are in Kindergarten are in the After Kindergarten Program and all other school-age children 1st grade through 6th grade are in the After School Program.

I understand HMCDS has a bus stop for Oakton Elementary School with both pickup and drop off. HMCDS sometimes has a bus stop for Sunrise Valley if we have a student in the GT program, but typically only a drop off. I further understand that HMCDS itself does not offer drop off and/or pick up of children from schools.

I have indicated below the schedule I want. "BS" indicates Before School (6:30am to 8:30am); "AK" indicates After Kindergarten (11:30am to 6:30pm Mondays and 1pm to 6:30pm Tuesdays through Fridays); "AS" indicates After School (1pm to 6:30pm Mondays and 4pm to 6:30pm Tuesdays through Fridays).

MON	TUES	WED	THURS	FRI

I understand that on snow days and school holidays (when HMCDS is open), my child is eligible to attend HMCDS, however on those days an additional fee will apply and will be included on the next monthly tuition bill.

I have attached my check in the amount of \$100 for the deposit. I understand that this \$100 will be credited toward the first month's tuition. The deposit is non-refundable.

Parent's Signature: _____ Parent Name: _____

Other Parent Name: _____ Work Phone: _____

Home Address: _____ Home Phone: _____

City: _____ State: ____ Zip: _____ Email: _____

DEPOSIT CONTRACT RECEIPT

Office Use Only

Child's Name: Start Year: <i>September</i>	Date Received: Received By: Check #:
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Your \$100 deposit places your child's name on our waiting list. It is non-refundable. Any changes from the original schedule requested must be put in writing to be considered and will be appended to your original After School Enrollment Deposit Contract form.