



**BOYS & GIRLS CLUB
OF BRAZORIA COUNTY**

**Connections After-School Program
20__ – 20__ SCHOOL YEAR**

WEEKLY FEE AGREEMENT

I/we understand that the charge per week for my child, _____, will be \$ _____, to attend Connections from school dismissal until 6:00 PM and the fee is payable in advance the first day of each week. If you prefer other payment dates it is imperative that you contact the office to prevent your account appearing past due. **I understand and agree that attendance of 3 days or more is considered a full week** and will be charged accordingly. I understand I must provide notice of my child's withdrawal to the site director or the Connections Program Director at (979) 373-9668. Failure to do so could result in my account being charged for one additional week. **I understand that at any time my account is more than two weeks past due my child/ren will not be allowed to return.** I understand that if my account becomes **past due on a repeated basis I will be charged a \$10 late fee per week.**

Payment is accepted in the form of cash, check, money order, Visa, Master Card, or American Express. I understand that Boys & Girls Club of Brazoria County's Connection's program does charge a \$15 returned check fee. Returned checks will not be re-deposited and failure to pick-up the returned check will result in prosecution through the District Attorney's Hot Check Division.

Name _____ DL# _____ DOB _____ EXP _____

Name _____ DL# _____ DOB _____ EXP _____

Parent/Guardian Signature **Date**



BOYS & GIRLS CLUB
OF BRAZORIA COUNTY

**Connections After-School Program
2009 – 2010 School Year
APPLICATION FOR REDUCED RATE**

Name of child/ren _____

Parent/Guardian _____

Place of employment (mother) _____

Place of employment (father) _____

Number in family _____

Do you receive any type of assistance including child support? _____

Total monthly income (mother & father) _____

Do you expect this to change within the next 30,60 or 90 days: _____yes _____no

Explain: _____

Why are you requesting assistance? _____

Parent/Guardian Signature

Date

****You must provide copies of your last three pay checks or stubs or proof of income for both parents.**