



BUNDY CANYON

CHRISTIAN SCHOOL



EXTENDED DAY CARE SCHEDULE

Kindergarten thru 8th Grades

School Year 2025-26

9/2/25 - 6/5/26

EXTENDED DAY CARE HOURS: 6:00AM - 8:30AM / 3:30PM - 6:00PM

SCHOOL HOURS: 8:30AM - 3:30PM

<u>Type of Enrollment</u>	<u>Annual</u>	<u>Paid in Full</u> Discounted 1 st Child Only *Due 9/1/25	<u>Installments (10)</u> *First Payment 9/1/25 Last Payment 6/1/26
1 st Child (Youngest Enrolled)	\$6,300	\$5,670	\$630
2 nd Child (2 nd Youngest Enrolled)	\$5,200		\$520
3 rd Child (All Other Children Enrolled)	\$4,500		\$450

Registration Fee due at Time of Registration (Non-Refundable) or by 7/1/25

<u>New Student Registration Fee</u>	<u>Returning Student Registration Fee</u>	<u>MATRICULATION FEE</u> Includes: Schoolbooks, Test & Quiz Books, SAT Testing Fees, and Annual Yearbook (Non-Refundable) *Due 8/1/25
\$200	\$150	\$650

Terms:

- Extended Day Care students are not charged for school tuition.
- School Year Extended Day Care Program runs from Sep. 2, 2025 to June 5, 2026.
- Extended Day Care Program fees will be billed in 10 equal monthly installment payments and are due and payable on the 1st day of each month beginning September 1, 2025, and the last payment on June 1, 2026.
- Matriculation Fee is due July 1, 2025. If paid after July 31st, subject to a \$50 expedited book shipping fee.
- No snacks or drinks are provided. (Drinking water is provided)
- Transportation is not provided.
- All students must be picked up by 6:00PM. A late fee of \$15.00 will be assessed and payable to the teacher on duty at the time for every 15 minutes you are late after 6:00PM.
- 30-day written notice is required before withdrawing from Extended Day Care Program. Failure to give such notice will result in being charged for that installment or for the thirty-day period regardless of attendance.

I hereby agree to the above terms as set forth by BCCS "Extended Day Care Schedule."

I agree to pay:

\$ _____ for 10 installment payments starting 9/1/25.

\$ _____ for a 1-time payment by 9/1/25 (First Child only).

STUDENT NAME (PRINT)

SIGNATURE (PERSON RESPONSIBLE FOR PAYMENT)

DATE

SS#