OPEN DOOR/PRIME TIME
2019/2020 SCHOOL YEAR

CHILD NAME ___________________________________________  SITE __________________________

CHILD NAME ___________________________________________  SITE __________________________

CHILD NAME ___________________________________________  SITE __________________________

PARENT NAME __________________________________________

SCHEDULE FOR: □ WEEK OF __________________________________ □ PERMANENT THRU ____________

PERMANENT SCHEDULES: Permanent Schedules only apply to standard school days. If you will need care on Delayed Starts/Half Days/Scheduled Days Off you must submit a schedule by the due date/time. Permanent schedules do not carry over to Winter/Spring Break or beyond the current school year.

IMPORTANT NOTE: One schedule may be used per family only if all hours are exactly the same. This includes the times their school starts.

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Schedules and payment are due no later than 6:00pm on the Wednesday prior to the scheduled week. Your account will be assessed a $10.00 late fee PER CHILD for schedules received after this time. Due date may change on Holiday weeks. Notification of this change will be posted and emailed. Schedules will not be taken over the phone.

Schedules with Cash or Check payments can be turned in at your Open Door site or at the Child Services office/drop box. Schedules with Credit Card Payments can be turned in at the locations listed above, emailed to children@ghaps.org, faxed to 616-850-6840 or completed online. Once a schedule is submitted by 6:00pm the Wednesday before the week of care, changes to the schedule cannot be made. Additional children will receive 10% discount. The child who attends the most is charged the full rate.

Preschool Aged Children Rates:
Hourly (6.5 or less hours per day) $6/hour*
Full Day (7 or more hours, less than 5 days/week) $40/day*
Full Time (7 or more hours, 5 days per week) $178/week*

* Actual hours are rounded up to the next ½ hour. Additional children will receive 10% discount. The child who attends the most is charged the full rate.

Young 5 – 6th Grade Rates:
Before School Care (anytime from 6:30am-8:30am) $12*
After School Care (anytime from 3:45pm-6:00pm) $12*
Delayed Start (anytime from 6:30am-10:30am) $22*
Half Days (anytime from 11:45am-6:00pm) $32*
Snow Days/Full Day (anytime from 6:30am-6:00pm) $40*

*Additional children will receive a 10% discount. The child who attends the most is charged the full rate.

AMOUNT PAID: ___________ □ CHARGE CC ON FILE □ CHECK # ___________ □ CASH □ OTHER ___________

All schedules must include child’s first and last name, school, parent first and last name, date of schedule, arrival and departure time, payment information and parent signature. Incomplete schedules will not be processed and late fees will apply.

PARENT/GUARDIAN SIGNATURE _________________________________________ DATE ____________

RECEIVED BY: ___________________________________________ DATE RECEIVED __________ LATE FEE? Yes / No