

**The Backpack Club, Inc.
P.O. Box 1481
Greenwood Lake, N.Y. 10925
845-477-0151**

Parents Contract

I _____ agree to pay Backpack Club, Inc. on a monthly basis. I will pay on the (1st) first of each month. If payment is not received by the (10th) tenth of the month, I will be charged a \$ 10.00 fee for every week my payment is late. I also cannot send my child/children to program until payment is received.

I will call Backpack if my child is not coming to program.

_____ **AM session (\$ 34.00 week \$136.00 month)**
_____ **AM daily (\$ 12.00 per day)**
_____ **PM session (\$ 50.00 week \$ 200.00 month)**
_____ **PM session (\$ 18.00 per day)**
_____ **Both session (\$ 82.00 week \$ 328.00 Month)**
_____ **Only days off (\$ 40.00 per day)**

(Parent/Guardian)

(Date)

Return check fee is \$ 35.00 if your checks are returned two times there will be a cash or money order policy from that day on.