



**Club Horizon 201%201& Payment Voucher**  
**2nd Quarter Registration Voucher #9**  
 Hours of operation 6:15am - 8:00  
 3:00pm - 6:00pm  
 Voucher period 11/2%1%through 12/8/1%

Club Horizon offers before and after school programs for students in kindergarten through sixth grade. The fee schedules are listed below. Please keep in mind that we are attempting to determine each days enrollment to best schedule staff, craft items, and snacks. To purchase these sessions please complete the following information and return with payment to the Club Horizon Room.

Child's Last Name: \_\_\_\_\_ Child's First Name: \_\_\_\_\_

Grade: \_\_\_\_\_ One voucher per child **\*\*\*This Voucher is due on or before 11/1\*/1%\*\*\***

**THERE WILL BE A \$25.00 LATE FEE AFTER DUE DATE**

**Scheduled Attendance**

Listed below is my child's attendance for the following days. I understand that these are the days that I am committing to and my fee reflects the discount for that commitment. I understand that if my child does not use all of the days that there will be no credit carried forward. Please circle **Yes** if your child will be attending that day and **NO** if they will not be attending.

| Week 1<br>Event           | Monday<br>11/2%/201% | Tuesday<br>11/2&/201%   | Wednesday<br>11/2' /201% | Thursday<br>11/2( /201% | Friday<br>11/2) /201% | Totals   |
|---------------------------|----------------------|---|--------------------------|-------------------------|-----------------------|--|
| A.M. session<br>scheduled | Yes / No<br>\$ 6.00  | Yes / No<br>\$ 6.00   | Yes / No<br>\$ \$ 6.00   | THANKS                  | THANKS                | total mornings this week _____ X \$6.00 = _____    |
| P.M. session<br>scheduled | Yes / No<br>\$ 12.00 | Yes / No<br>\$ 12.00  | Yes / No<br>\$ \$ 12.00  | GIVING                  | GIVING                | total afternoons this week _____ X \$12.00 = _____ |
| section 1                 |                      | Total dollar amount for this week's scheduled enrollment (AM + PM) \$ _____ |                          |                         |                       |  |

| Week 2<br>Event           | Monday<br>11/2, /201% | Tuesday<br>11/8- /201%  | Wednesday<br>1%' \$/201% | Thursday<br>12/%201% | Friday<br>12/8/201%  | Totals   |
|---------------------------|-----------------------|---|--------------------------|----------------------|----------------------|--|
| A.M. session<br>scheduled | Yes / No<br>\$ 6.00   | Yes / No<br>\$ 6.00   | Yes / No<br>\$ 6.00      | Yes / No<br>\$ 6.00  | Yes / No<br>\$ 6.00  | total mornings this week _____ X \$6.00 = _____    |
| P.M. session<br>scheduled | Yes / No<br>\$ 12.00  | Yes / No<br>\$ 12.00  | Yes / No<br>\$ 12.00     | Yes / No<br>\$ 12.00 | Yes / No<br>\$ 12.00 | total afternoons this week _____ X \$12.00 = _____ |
| section 2                 |                       | Total dollar amount for this week's scheduled enrollment (AM + PM) \$ _____ |                          |                      |                      |  |

**Notes:**

- 1) There will be no credits/refunds.
- 2) Parents must physically sign their children into and out of the program each day.
- 3) Club Horizon Fees:

|           | <u>Scheduled</u> | <u>Drop-in</u> |
|-----------|------------------|----------------|
| <b>AM</b> | \$6.00           | \$8.00         |
| <b>PM</b> | \$12.00          | \$15.00        |

- 4) Club Horizon must have a completed Voucher for every child in the program.
- 5) Please return your completed BLUE CARD to the Club Horizon Office.

Voucher number 9-Q2

AMT PAID \$ \_\_\_\_\_

DATE: \_\_\_\_\_ RCT # \_\_\_\_\_

CASH CHECK# \_\_\_\_\_ CHG

REG 2 CASHIER \_\_\_\_\_

Voucher Total \$ \_\_\_\_\_

Print Parent Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_