



**FEBRUARY**  
**Red Rocks Community College SACC**

One copy printed or emailed to the Site Manager & one copy emailed to accounting.

**Email:** [sacc@rrcc.edu](mailto:sacc@rrcc.edu)

**School Name:** \_\_\_\_\_

**Parent Number:** \_\_\_\_\_

**Parent Name:** \_\_\_\_\_

**Child's Name:** \_\_\_\_\_

<b>Option A Rates:</b>	<b>AM</b>	\$11.50/\$13.00	<b>PM</b>	\$17.00	<b>AM&amp;PM</b>	\$19.50
<b>Option B Rates:</b>	<b>AM</b>	\$13.00/\$14.50	<b>PM</b>	\$18.50	<b>AM&amp;PM</b>	\$21.00

**February**

Monday	Tuesday	Wednesday	Thursday	Friday
1 AM PM	2 AM PM	3 AM PM	4 AM PM	5 AM PM
8 AM PM	9 AM PM	10 AM PM	11 AM PM	12 Full Day (Separate Sign in Sheet)
15 Holiday Closed	16 AM PM	17 AM PM	18 AM PM	19 AM PM
22 AM PM	23 AM PM	24 Early Release (Separate Sign in Sheet)	25 AM PM	26 AM PM
29 AM PM				

**Due to the high volume of registrations, please refer to this form for your amount due for February.**

Number of AM's  
 # \_\_\_\_\_ days x \$ \_\_\_\_\_ =

Number of PM's  
 # \_\_\_\_\_ days x \$ \_\_\_\_\_ =

Number of AM's & PM's  
 # \_\_\_\_\_ days x \$ \_\_\_\_\_ =

Add your totals to get your monthly fees.

Monthly Fees:

Please circle AM or PM or Both on the dates your child will attend this month. Dates/Times circled will be what you are charged & expected at site. All other times your child comes will be charged as drop in. Variables are required to utilize a minimum of three days per week.