



**MARCH**  
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:** \_\_\_\_\_

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

Monday	Tuesday	Wednesday	Thursday	Friday
	1 AM PM	2 AM PM	3 AM PM	4 AM PM
7 AM PM	8 AM PM	9 AM PM	10 AM PM	11 AM PM
14 AM PM	15 AM PM	16 AM PM	17 AM PM	18 AM PM
21 Spring Break (Separate Sign in Sheet)	22 Spring Break (Separate Sign in Sheet)	23 Spring Break (Separate Sign in Sheet)	24 Spring Break (Separate Sign in Sheet)	25 Spring Break (Separate Sign in Sheet)
28 Spring Break (Separate Sign in Sheet)	29 AM PM	30 AM PM	31 AM PM	

Please refer to this form for your amount due for March. Spring Break charges will be billed separately based on enrollment sheet at sites. Payment is due in advance of care.

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 check AM, PM, or Both on the dates your child will attend this month. Dates/Times checked will be what you are charged & expected at site. All other times your child comes will be charged as drop in.