September 2017



Red Rocks Community College SACC

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

Email: sacc@rrcc.edu

	School Name				
	Parent Name				
	Child's Nar	ne			
Option A Rates:	AM \$11.50/\$13.00	PM \$17.00	AM & PM \$19.50		
Option B Rates:	AM \$13.00/\$14.50	PM \$18.50	AM & PM \$21.00		

SEPTEMBER 2017					
Monday	Tuesday	Wednesday	Thursday	Friday	
				1	
				AM	
				PM	
4	5	6	7	8	
Labor Day	AM	AM	AM	AM	
SACC CLOSED	PM	PM	PM	PM	
11	12	13	14	15	
AM	AM	AM	AM	AM	
PM	PM	PM	PM	PM	
18	19	20	21	22 Early	
AM	AM	AM	AM	Release (Separate	
PM	PM	PM	PM	sign in sheet)	
25	26	27	28	29	
AM	AM	AM	AM	AM	
PM	PM	PM	PM	PM	

Please refer to this form for your amount due for September. Please check with your individual school sites for flex testing days for your school. On these days, care may be provided as a Full Day and enrollment and billing is based on sign-up sheets at the site. Full Day charges will be billed separately. 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 charge.

Please check AM or 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. Variables are required to utilize a minimum of three days per week.

Monthly Charge: