



Purchase Community, Inc. • 3095 Purchase Street • Purchase NY 10577 • T. 914.949.2636 • F. 914.949.0955 • www.purchasehouse.com

AFTERCARE FULL YEAR ENROLLMENT FORM

Use this form to enroll in the program for the year

Student Name: _____

AFTERCARE PROGRAM YEARLY September 15 th – June 1 st		
Enrollment	Aftercare Time Monday - Friday	Fee
<input type="checkbox"/>	1:00pm – 2:00pm	\$1600 / School Year
<input type="checkbox"/>	1:00pm – 3:00pm	\$3200 / School Year

I would like to register my child for the Aftercare Program for the school year at the fee listed above. I understand there is no refund for days missed due to illness, weather, or family vacations.

Parent Signature