

**The First Academy
After School Program
Grades K4 – 12th**

Schedule Details

K4-5th Grade After School - 2:45 pm to 6:00 pm (from 2:05 pm on Wednesday)

Students have snack time, homework time, and free play inside and outside. Special on-campus activities are also scheduled throughout the year.

6th-8th Grade After School - 3:10 pm to 6:00 pm (from 2:35 pm on Wednesday)

This is an assigned study hall, located in the Library.

9th-12th Grade After School - 3:10 pm to 6:00 pm (from 2:35 pm on Wednesday & Friday)

This is an assigned study hall, located in the TFA Library. *US Students who do not have a means to leave the campus on Friday at 2:35 pm will remain in Zero Hour until 3:10 pm.*

**After School is closed on all official holidays, as well as school holidays & Teacher Work Days. Please check the school calendar.*

Pricing Structure

Unlimited Use

An unlimited use ticket qualifies participants to use After School any time it is open. The cost is \$1,750 per year, which may be paid annually, semi-annually with two equal installments at the beginning of each semester, or monthly. Monthly payments may be made via SMART account, check or credit card charge.

Occasional Use

An Occasional Use tickets may be purchased from the Business Office (30 hours = \$225 **or** 15 hours = \$130. Each half-hour, or portion thereof, is deducted from the ticket when used. Tickets may be split among siblings, as long as they are in the same program. Tickets cannot be split between Lower School and Middle/Upper School students. Parents will be notified when a new ticket should be purchased. Tickets can be carried over from one year to the next. No refunds for unused hours will be given. Tickets can be purchased using the payment authorization form **OR** online at [www.thefirstacademy.org/TFA Community/Parent Resources/After Care Online Payment Link](http://www.thefirstacademy.org/TFA%20Community/Parent%20Resources/After%20Care%20Online%20Payment%20Link).

Emergency Use

We provide “emergency” care for unforeseeable events. If you require emergency care and have no ticket, please call 407-206-8619 by noon to arrange for After School services. The charge is \$15.00 per hour, or any portion thereof. These fees are due and payable when you pick up your child. A 25 percent administrative fee will be added if you do not pay at that time and have to be billed for After School services.

Late charges apply for all payment plans. After 6:00 p.m., the charge is \$10.00 per quarter hour.

The First Academy - After School Program
Registration Form
2011-2012

Student Name: _____ Grade: _____

Address: _____

Parent/Guardian: _____

Cell: _____ Work: _____ Home: _____

Allergies or special concerns: _____

Names of those allowed to pick-up your child: _____

Emergency contacts (other than parents):

Name: _____ Name: _____

Phone: _____ Phone: _____

Relationship: _____ Relationship: _____

Please Complete Payment Authorization Form

Signature of Parent/Guardian _____



**The First Academy
After School Program 11-12
Payment Authorization Form**

Parent Name: _____ **Date** _____

Student Name: _____ **Grade:** _____

Email Address: _____ **Phone:** _____

I agree to the following payment plan:

- _____ **Unlimited Use Annual payment** **\$1,750 - August**
- _____ **Unlimited Use Semi-Annual payment** **\$875 – August & January**
- _____ **Unlimited Use Monthly payment** **\$175 – August 20th – May 20th**
- _____ **30-hour ticket** **\$225 (by check or cc (auto pay* option available))**
- _____ **15-hour ticket** **\$130 (by check or cc (auto pay* option available))**
- _____ **Emergency** **\$15 per hour - enter total \$_____**

Payment through SMART

_____ I currently have a SMART account and would like to add the above payment plan to that account. Please inform me of my new payment.

Signature _____ **Date** _____

Payment via Credit Card

Name as it appears on card: _____

Billing Address: _____

City: _____ State: _____ Zip _____

Type of Card (circle one): **Visa** **MasterCard** **Discover** **American Express**

Card Number: _____

Exp Date: _____ Card Code: _____ Initial for auto pay* _____

*Auto Pay: Ticket purchases only. When one ticket is used, we will automatically charge your card for another ticket. Unused hours will carry over to following year.

Signature _____ **Date** _____

Please make checks payable to The First Academy. Thank you!