

After-School Program



Best in Class Education Center Bellevue offers an affordable and high quality after-school program for Bellevue School District elementary school students. Our after-school program provides homework help and academic enrichment (English and math) as well as fun and creative activities. We provide a safe, healthy, and fun learning environment where your children can build character, organizational skills, study skills, and much more. We can help save time for you by ensuring that your children complete their daily homework and have the opportunity to participate in enriching programs.



Program Details

Homework Help: We will spend at least one hour a day with your child(ren) to help them with their school homework assignments.

Best in Class Enrichment Math and English: Students will be given a packet of our proprietary enrichment math and English curriculum each week. Our weekly math packets include computations, problem solving, multiple choice questions, and more. Our weekly English exercises cover reading comprehension, vocabulary, grammar, test preparation, and writing skills.

Life Skills: We also help students establish organizational skills, study habits, teamwork, and social skills through group activities and interaction with other students and staff. These skills are a large part of academic success.

Other Activities: Students can also participate in table tennis through Seattle Pacific Table Tennis Club or chess through Chess4Life (extra fees apply- see below)

Cost

Monthly Tuition Fee*: 5 days: \$425 or 4 days: \$375

OPTIONAL Add-On Activities: TBD. A complete list of partners and pricing options will be available at a later date.

Registration Fee: \$50 (one-time fee and this includes the placement test fee)

Monthly Transportation Fee: 5 days: \$125 or 4 days: \$100

We may provide van pickup from the following schools: Cherry Crest, Spiritridge, Wilburton and Woodridge. We will only pick up from schools with a minimum of 3 students enrolled in the program.

Family Discount: A 5% discount is given to the 2nd and 3rd child enrolled from the same immediate family.

Days of Operation:

Tuition fees and schedule are based on the Bellevue School District academic calendar for the 2018-2019 school year. We will not provide after-school classes during school breaks or on federal holidays, but will reduce monthly tuition fees accordingly. We will operate during all regular school days, professional development, and early-release days. The final day for after-school classes will be Friday June 20th, 2019 and resume Fall 2019.

Hours of Operation:

Classes will commence shortly after students are released from school and continue until 6:00 PM.

Pick up time is between 6:00 to 6:30 PM.

Hours of operation for professional development days shall be from 9:00 AM to 5:00 PM.

Registration Procedures



Thank you for your interest in joining our After-School Program (ASP). To enroll your child(ren), please complete this entire enrollment packet and return it to our office.

There are 3 fees associated with the ASP:

1. Registration fee: \$50 (this is a one-time fee and includes the assessment test)
2. Monthly transportation fee (optional)*: 5 days: \$125 or 4 days: \$100
3. Monthly ASP fee:
 - a. September, October, November, January, March, and May: 5 days: \$425 or 4 days: \$375
 - b. December, February, and April: 5 days: \$330 or 4 days: \$295
 - c. June: TBD

*Best in Class provides transportation from select schools in the **Bellevue School District** area. Check with the After-School Program Director for availability.

First payment and registration fees may be paid by check. All subsequent payments must be made via Electronic Funds Transfer (EFT). All applicable fees are due at the time of registration.

Family discount: We offer a 5% sibling discount to the 2nd and 3rd child of the same family. The discount is applied towards the student(s) with the lowest tuition rate. The discount is not applied towards the transportation fee.

For those students who need transportation from us, parents will need to contact the school to provide authorization for our ASP van to pick up your child(ren). This is a crucial part of the registration process and must be done before our van can pick up your child(ren) from school.

Tuition is due in full **by the 1st of each month** regardless of vacations, illnesses, or school closures. Payment will be considered late if paid after the 1st of the month and a \$30 late fee will be charged. Monthly invoices will not be mailed or emailed to you, but they can be obtained at our office if requested.

Late notice/pick-up charges: Students may be picked up from our center between 6:00 PM to 6:30 PM. If a student is not picked up by 6:30 PM, the parent/guardian is considered late and the parent/guardian will be charged five dollars (\$5) for every five (5) minutes he/she is late. Additionally, if a student we are transporting from school will be absent, we require at least four (4) hours notice before the school release time. We will charge ten dollars (\$10) for less than two (2) hours notice of absence from school. We understand that unavoidable or emergency situations might occur on rare occasions, causing a parent/guardian to be delayed or unable to provide two hours notice. Our After-School Program Director will assess emergency situations on a case-by-case basis in determining the late notice/pick up fee. However, please understand that we do have to pay our staff overtime if you pick up your students late, and we must pay our partner drivers or become late for the next pick up if we receive little or no notice.

Registration Form



Student 1 Information

First Name	Middle Initial	Last Name	<input type="checkbox"/> Male <input type="checkbox"/> Female	School
Date of Birth	Age	Grade	Height	Booster Seat? <input type="checkbox"/> No <input type="checkbox"/> Yes

Student 2 Information

First Name	Middle Initial	Last Name	<input type="checkbox"/> Male <input type="checkbox"/> Female	School
Date of Birth	Age	Grade	Height	Booster Seat? <input type="checkbox"/> No <input type="checkbox"/> Yes

Address

Address	City, State Zip
---------	-----------------

Parent/Guardian #1 Information

Full Name	Relationship to Student
Cell Phone	Home Phone
Email	Alternate Email
Instructions on best way to contact you in the event of an emergency:	

Parent/Guardian #2 Information

Full Name	Relationship to Student
Cell Phone	Home Phone
Email	Alternate Email
Instructions on best way to contact you in the event of an emergency:	

Please help us get to know your child by writing something about him/her (personal traits, likes/dislikes, activities, favorite games or subjects, etc.):

Rules and Polices



1. Tuition must be paid through EFT only.
2. Registration Fee: \$50 payable on the date of registration.
3. A \$30 service fee is charged for a check or EFT returned from the bank.
4. Students may begin mid-month. However, tuition is pro-rated for the first time only according to the day of the month enrolled. Full tuition is charged for all subsequent months. **No partial monthly payment is accepted.**
5. Fees will be collected monthly from your checking or savings account through "autopay" EFT on the 1st day of each month or the next available business day.
6. **Paid tuition is non-refundable and non-transferrable** regardless of missed classes, absences or partial month cancellations.
7. **Referral credit:** Best in Class is pleased to award \$25 for both parties for referring a new student to Best in Class. Student must enroll in one of our programs to qualify for the referral credit.
8. Absence notices must be given at least four (4) hours before school release time. We will charge ten dollars (\$10) for less than two (2) hours notice of absence from school.
9. Students may be picked up from our center between 6:00PM to 6:30PM. If a student is not picked up by 6:30PM, the parent/guardian is considered late and the parent/guardian will be charged five dollars (\$5) for every five (5) minutes he/she is late.
10. Please provide the center notice of vacation at least two weeks prior to vacation.
11. If you intend to withdraw, **written notice of 45 days before the last day of class is required.** We need this time in order to cancel "autopay" service and apply the last month deposit. **Paid tuition cannot be refunded or transferred.**
12. All students are required to show respect for their instructors and peers at all times.
13. If student is disruptive in class, after two warnings, we reserve the right to refuse service.
14. Please keep the center and surrounding facilities QUIET and CLEAN at all times.
15. Do not allow students to wander outside the center without proper supervision.
16. Parents, please **do not enter students' work area.** Parents are not allowed to enter classrooms while tutoring is in session. If your child has special needs, please notify the manager ahead of time to discuss.
17. For the safety of the students, parents must park their vehicles properly and come in to the center to pick up and sign out their children.
18. Parents authorize Best in Class Education to use child's image/likeness and completed class/art work for promotional purposes.

We would like to remind all parents that our insurance policy requires that we do not keep the children longer than our service agreement, as we do not have a licensed babysitter on the premises. Also, in order to ensure that all students receive their tutoring, it is required that all students arrive and leave on time. Thank you for your cooperation.

Policies are subject to change without notice.

I acknowledge that I have read and understood the Rules and Policies on this page.

Parent/Guardian Signature: _____

Date: _____

Printed Name: _____

Health & Medical Care



Please answer the following medical questions below. If you answer “Yes” to any of the following questions, you may be contacted by our office staff for further information.

Question	Yes or No	Please Describe
Has your child been tested or treated for concerns with speech, hearing, physical, emotional, or social development?		
Does your child have any food allergies?		
Does your child have any allergies other than food allergies?		
Does your child have any medical conditions (i.e. diabetes, asthma, chronic illness, etc.)?		
Does your child take any prescription medication?		
Does your child need to take this medication at our ASP? If yes, you will need to fill out a medical authorization form with instructions.		

Consent for Emergency/Medical Treatment of Children and Release:

As the parent or legal guardian, I hereby give consent to Best in Class Education Center that my child(ren), _____, may be given emergency treatment to include 1st Aid/CPR by a qualified staff member of Best in Class Education Center, or Medic 1, or other emergency care personnel. I further give permission for my child(ren) to be transported by an aid car, ambulance or staff car to the nearest medical treatment center or hospital if necessary. In the event that I cannot be contacted, I further authorize and consent to the medical, dental, surgical, hospital care, treatment, and procedures to be performed for my child(ren) by a licensed physician (M.D.), dentist (D.D.S.), or hospital when deemed immediately necessary or advisable by the physician to safeguard the life, limb, or well-being of my child(ren). I waive my right of informed consent to such treatment. I will hold Best in Class Education Center and their representatives harmless for any damages or injuries that may occur.

It is understood that a conscientious effort will be made to notify me or other persons listed on this form before medical action is taken. The expense of this service will be accepted by me.

Preferred Sources of Medical Care for Your Child(ren)

Child(ren)'s Physician	Physician's Phone Number
Health Insurance Company	Policy Number

I have read and understood all the above. I declare under the penalty of perjury under the law of the State of Washington that the foregoing is true and correct:

Parent/Guardian Signature	Date
---------------------------	------

Payment Authorization



Electronic Funds Transfer Authorization Form

First Name	Last Name		
Address	City	State	Zip
Phone Number	Email		
Bank Name	Bank City, State		
Bank Routing Number (9 digits)	Account Number	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings

SAMPLE **A123456789 A0011223344C 0100**
 Routing Number Account Number Check Number
 (9 digits) (length varies)

- Monthly Tuition payment is ONLY accepted via automatic Electronic Funds Transfer (EFT).
- **Voided, first month's check or bank-authorization/confirmation to verify account information must be attached.**
- A non-sufficient funds (NSF) fee of \$30.00 will be charged for each transfer that is returned. All families are expected to keep their accounts current.
- If you intend to withdraw, **written notice of 45 days before the last day of class is required.** We need this time in order to cancel "autopay" service and apply the last month deposit. **Paid tuition cannot be refunded or transferred.**
- Tuition is due in full regardless of vacations, illness, or school closures.
- A 5% family discount is given to 2nd and 3rd child of the same family.

I hereby authorize Best in Class Education Center (BC) to make deductions from my bank account when payments are due, and initiate adjustments for any duplicate or erroneous entries made in error to the account indicated above. I hereby authorize the financial institution/bank named above to credit and/or debit the same such account. This authorization agreement is effective as of the signature date below and is to remain in full force and effect until BC has received written notification from me of its termination.

I have read, understand, and agree with the above EFT Authorization Agreement.

 Authorized Signature

 Date

For office use only

Fees	1 st Payment	Monthly Payment
Registration Fee x No. of children	\$	
Monthly Tuition x No. of children	\$	\$
Monthly Transportation	\$	\$
TOTAL	\$	\$