

P.E.A.C.E. Afterschool Program Enrollment - 2020

Parent/Guardian Name:	
Name of Child(ren) enrolled: _	

Using the chart below, indicate your rate level based on family size and GROSS monthly income.

Income categories are based on GROSS monthly income (before taxes) & Family Size					
RATE LEVEL	Number of Persons in Household				
10112 22 722	2	3	4	5	6
Full Cost	Over \$4,229	Over \$5,334	Over \$6,439	Over \$7,544	Over \$8,649
Moderate	\$3,749 - \$4,228	\$4,729 - \$5,333	\$5,709 - \$6,438	\$6,689 - \$7,543	\$7,668 - \$8,468
Reduced	\$2,819 - \$3,748	\$3,556 - \$4,728	\$4,293-\$5,708	\$5,029 - \$6,688	\$5,766 - \$7,667
Low	\$2,608 - \$2,818	\$3,289 - \$3,555	\$3,971 - \$4,292	\$4,652 - \$5,028	\$5,334 - \$5,765
Scholarship	Less than \$2,607	Less than \$3,288	Less than \$3,970	Less than \$4,651	Less than \$5,333

Circle your rate level based on income/family size:

Full Moderate Reduced Scholarship Low

3 days 4 days 5 days Number of days/week your child(ren) are enrolled:

Days of the week your child(ren) are enrolled: Thurs Fri Mon Tues Wed

Monthly Rate Schedule First Child			
Rate Level	Days per Week		
	3	4	5
Full	\$162	\$216	\$270
Moderate	\$97	\$130	\$162
Reduced	\$54	\$72	\$90
Low	\$32	\$43	\$54
Scholarship	\$0	\$0	\$0

Parent Signature: ____

Monthly Rate Schedule Additional Child			
Rate Level	Days per Week		
	3	4	5
Full	\$108	\$144	\$180
Moderate	\$65	\$86	\$108
Reduced	\$43	\$58	\$72
Low	\$22	\$29	\$36
Scholarship	\$0	\$0	\$ 0

New Monthly Rate for family:	

__ Date: __