

Program Year 2011-2012

_____ is enrolled at _____
(Child's Name) (Center Name)

Umatilla Morrow Head Start will provide pre-school services during the time the staff is at work. The cost will be \$_____ per month, payable by the 7th of the month. Payroll deduction is available.

Center Base Program monthly rate:

4 day per week program: \$175 per month

4 day per week program with transportation: \$210 per month

Staff's signature and date