

July 2026

Dear Martha & Mary Kids Families,



We'd like to welcome you to M&M Kids Before & After School Program. We're excited to have your child(ren) as a part of our program this year, and look forward to working with your family.

Program Start Dates:

- For **North Kitsap School District:**
 - NKSD students in grades 1-5 will begin school on Monday, 8/31.
 - Kindergarteners will begin school on Thursday, 9/3.
- For **Central Kitsap School District:**
 - All CKSD students will begin school on Monday, 8/31. The first three days of school are half days. School will release at 11:50am. Our program will be in session 6am-9:05am, and 11:50am-6pm. Please send your child with a lunch.
 - **Please note: CKSD Kindergarteners will not have school Thursday, 9/3 & Friday, 9/4, while 1st through 5th grades still have school. Care will only be provided the following hours: Thursday (9/3) 6am-9:05am, 2pm-6pm; Friday (9/4) 6am-9:05am, 3:30pm-6pm.**
 - Full Day Kindergarten for CKSD starts on Tuesday, 9/8. If your Pre-K child is currently enrolled at the CCLC/ELC we recommend continuing their enrollment through 9/4, if you'll need care the first week of September during non-school hours. Please speak with your director.

Martha & Mary KIDS will be providing care for the 2026-2027 school year at Cougar Valley Elementary (CK), Pearson, Poulsbo, Suquamish and Vinland Elementaries (NK). *If you are in need of care at Gordon or Wolfe, please reach out to the provider at those schools.*

To enroll your child in Before & After School Care we require the following:

- **New Enrollments - Online Registration (Required)** – visit www.marthaandmary.org/child-care and click on "Register Now" for the registration link. Submit registration for "B&A 2026-2027 NEW Registration".
- **Re-Enrollments – Online Registration (Required)** - log in to your account on www.myprocare.com and submit your child's re-registration for "B&A 2026-2027 RE-Registration".
- **Additional Forms Packet – Required forms to complete enrollment:** Financial Agreement and Parent Authorizations Form. New enrollments will be required to submit Immunization Records. Email to office upon completion of online registration (emails listed below).
- **Registration Fee** – Due at time of registration. If a wait list is established, we will require payment at time a space is offered.
- **New Enrollments Only** - Payment for the registration fee and half of first month's tuition is due upon enrollment. A parent orientation will be required at least 48 hours prior to child's first day.

We are a licensed program with a staff to child ratio of 1:15, though we have two staff on site at all times. We are open Monday through Friday from 6am until the start of school, and after school until 6pm. During this time, we offer stimulating activities including cooking, science, reading, STEM and community outreach, as well as an opportunity for free time and positive interaction with peers. On non-school days and during breaks (winter, spring, and summer) we are open for full day care at Poulsbo Elementary (NKSD) and Cougar Valley Elementary (CKSD). We accept DSHS, Tribal, and Military Subsidies with verified authorization prior to start.

We look forward to seeing you in the Fall. If you have further questions, please feel free to contact our main office.

Respectfully,

Terry McCutcheon

&

James McCutcheon

Program Director

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Martha & Mary KIDS Before & After School Program SY 2026-2027 Fee Schedule



Registration Fees:

- New Child Registration: \$50.00 first child; \$40.00 each additional child (non-refundable)
- Continued Enrollment: \$20.00 per child if enrolled by Aug. 9th; \$30.00 per child Aug. 10th or after

CONTRACTED RATES are based on a consistent schedule submitted at the start of the year. Full time tuition is a discounted monthly tuition rate divided over 10 months (September through June). This amount is not adjusted for non-school days, breaks, closures, or shorter months.

Part time contracted rates are based on consistent scheduled days and sessions each week (ex. AM only, Mon/Weds/Fri) and cannot be switched without prior approval and submission of an updated financial agreement.

CONTRACTED FULL TIME (5 Days per Week)

Scheduled Care	Flat Rate	Non-School Days
Before & After School Care	\$655.00/month	Additional \$10.00
Before Care Only	\$365.00/month	Additional \$25.00
After Care Only (includes early release & half days)	\$365.00/month	Additional \$25.00

CONTRACTED PART TIME (1-4 Days per Week)

Scheduled Care	Rate/Day (Based on Schedule)	Non-School Days
Before & After School Care	\$45.00/day	\$55.00, if contracted for Non-School Days that fall on scheduled day.
Before Care Only	\$22.50/day	\$55.00, if contracted for Non-School Days that fall on scheduled day.
After Care Only (includes early release & half days)	\$22.50/day	\$55.00, if contracted for Non-School Days that fall on scheduled day.

NON-CONTRACTED RATES are based on a schedule submitted monthly. Tuition is based on what is submitted and is subject to space availability. Contracted families will have priority. There is a two day per month minimum. A space hold fee in the amount of \$50.00 will be billed if no schedule is submitted.

NON-CONTRACTED RATES (2 Days per Month Minimum. Must submit a calendar by the 20th of the previous month.)

Scheduled Care	AM & PM Care	AM Care Only	PM Care Only	Full Day Care	AM or PM Drop-In Care	Full Day Drop-In Care
Daily Per Session	\$47.00	\$23.50	\$23.50	\$60.00	\$25.00 per session*	\$70.00*

Attendance Policies

- If your child is absent, you are still charged.
- Tuition is based on contracted schedule, not on attendance. If additional days are needed you are welcome to add days at the drop-in rate, with prior approval, if space is available.
- Monthly calendars (non-contracted families) are due no later than the 20th of the previous month.
- Late Pick-Up Fee (per child): \$2.00 per minute (\$10.00 minimum) due at pick-up.

Payment Schedule

- Payments are due by the 20th of each month.
- Late payment fee of \$30.00 is assessed on the 25th of the month on all unpaid balances.
- Delinquent accounts not made current by the last day of the month will result in termination of enrollment.
- 30 days' written notice is required if you wish to terminate your child's enrollment with Martha & Mary Kids.
- Discounts offered for siblings, active duty military, and NKSD or CKSD employees. One discount per family, discount is applied to oldest child's tuition.

January 2026

Payment Options



Dear Family,

Welcome to Martha & Mary KIDS! We are pleased to offer several payment methods to best fit your family. Tuition is billed at the start of the month for that month of care. Tuition payments are due on the 20th of each month with late payment fees assessed to unpaid balances on the 25th. All balances must be paid in full by the last day of the month, or you may experience an interruption in services until your account has been brought current for the previous month.

You are welcome to make payment on your monthly tuition via any of the listed methods below:

- **Debit/Credit Card Transactions:** Families may submit payment via credit card at any time **through MyProcare.com**. Additionally, if you are interested in **automated charges to your credit/debit card on the 20th of each month**, you can request a secure link from your center/program director to set up automated charges. *All credit/debit payments (whether submitted through MyProcare, or automated) are subject to a 4% convenience fee.*
- **ACH Transactions:** If you are interested in **automated withdrawal directly from your checking account (ACH transaction) on the 20th of each month**, you can request a secure link from your center/program director to set up automated withdrawal. *ACH transactions are subject to a \$1.00 processing fee.*
- **Cash/Check/Money Order:** Payments are always accepted at your child's center/site via cash, check, or money order. If paying by cash, please see the staff to ensure you receive a receipt for your payment.

If you have any questions, please feel free to speak with your center director.

Thank you,

Martha & Mary KIDS



Child's Name _____

**PARENT AUTHORIZATION
PROGRAM PARTICIPATION & CONSENT
2026-2027 School Year**

Parent Initials _____ **Participation Release:** I give permission for my child to leave the center/site by foot for outdoor exercise and educational purposes with the understanding that my child will be accompanied by center staff and under proper supervision at all times. I also give permission to Martha & Mary to transport my child to and from the site on field trips and other activities (additional permission form to be signed day-of) by bus or company vehicle.

Parent Initials _____ **First Aid:** I give Martha & Mary authorization to administer first aid and emergency treatment by a qualified staff member of Martha & Mary, as necessary.

Parent Initials _____ **Medical Treatment:** In the event that I cannot be reached, I give Martha & Mary staff permission to obtain medical care for my child. I further authorize consent to medical, surgical and hospital care, treatment and procedures to be performed for my child by a licensed physician or hospital when deemed necessary or advisable by the physician to safeguard my child's health and I cannot be contacted. I waive my right of informed consent to such treatment. I expect that a conscientious effort will be made to locate my designees or myself. I will accept any expenses incurred.

Photographs/Videos (please initial one):

_____ *Center Use Permission:* I give permission for my child(ren) to be photographed and videotaped while participating within the center, and during program functions and field trips. I understand that photographs/videos may be taken by center staff, or by parents/guardians, and *may be shared via email, or through Procure, to families of children in the photos.*

_____ *Parent/Guardian Only:* I give permission to have my child(ren) photographed and videotaped for *parent/guardian sharing purposes only* through Procure. I understand that my child(ren) will not be included in group photos with their class.

_____ *No Permission:* I do not give permission for my child(ren) to be photographed or videotaped for any purpose while in care, and understand that *I will not receive photo/video updates of my child(ren) through Procure.*

_____ *Full Permission:* I give *full permission* for my child(ren) to be photographed or videotaped while in care, and I give permission for my child's image to be used in print or electronic format to promote Martha & Mary KIDS child care services. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect during the term of my child's enrollment, unless notified otherwise. I understand that there will be no payment for my, or my child's, participation.

Parent Initials _____ **Policy:** I acknowledge that I have received and understand the parent information packet and handbook and agree to abide by the policies stated therein. I fully understand the rights, responsibilities, and relevant facility policies and procedures. I acknowledge that I understand, and agree to abide by the policies of Martha & Mary.

Signature of Parent/Guardian: _____ **Date:** _____

Signature of Parent/Guardian: _____ **Date:** _____





Child's Name:

Site:

**Enrollment Agreement
Financial Information 2026-2027****SITE HOURS OF OPERATION**

The school sites are open from 6:00 a.m. to 6:00 p.m., Monday through Friday. Sites will be closed in observance of the following holidays: New Year's Day, President's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving, the day after Thanksgiving, and Christmas Day. Sites will close at 4pm on Christmas Eve. *Additional Cougar Valley closures include: Veteran's Day, Christmas Eve, New Year's Eve, and MLK Day.*

I understand that, in accordance with school age licensing regulations, my child may be released to the custody of Child Protective Services or other local authorities, if I (or other authorized persons) fail to pick up my child and/or contact the site and I (or other authorized persons) cannot be reached within 30 minutes after close-of-business.

The sites will be open whenever possible on regularly scheduled days, during normal business hours. The procedure for notifying families of delays and closures due to inclement weather and/or emergencies will be posted at each site. If it becomes necessary to close early, I understand that it will be my responsibility to arrange for my child's prompt pick-up.

FEE SCHEDULE AND FINANCIAL TERMS

1. I agree that, in consideration of admission to Martha & Mary Kids and the rendering of services to my child(ren), I am obligated to pay all charges incurred in accordance with the payment regulations and current rate schedules of Martha & Mary Kids. The current rate schedule is attached.
2. Payments are due by the 20th of each month for monthly services. A late charge of \$30.00 is assessed on accounts not paid in full by midnight on the 24th of the month. Accounts not made current by the last day of the month are in default. At that time, the child's enrollment will be terminated until the account has been paid in full. I understand that a new registration fee may be required in order for my child(ren) to return. Past due accounts bear interest in the amount of 12% per annum. Should the account be referred to an attorney for collection, the undersigned agrees to pay reasonable attorney's fees and all collection expenses.
3. Martha & Mary will not be responsible for unbalanced ledgers due to parent/guardian disputes. If a bill is paid by more than one party, the division of fees is strictly the responsibility of the parties involved.
4. Tuition fees are contracted and are not subject to pro-ratio for absences, illnesses, vacations, or emergency closure of the program for inclement weather or pandemic closures. I understand that scheduled days may not be changed unless prior approval is received, and a new financial agreement is submitted and approved with 30 days' notice.
5. I agree that I will pay the full tuition fees, even if my child(ren) is absent for one or more scheduled days.
6. A late pick up fee of \$10.00 for the first 5 minutes and \$2.00 per minute thereafter will be assessed (*per child*) when a child attends past close-of-business. I understand that late pick up fees are due on the day of service, and must be paid before my child(ren) returns to care the following day. The late pick-up fee does not constitute an agreement to provide after-hours services.
7. I understand that there is a fee of \$35.00 for returned checks. Payments from customers with prior outstanding returned checks must be redeemed in the form of a money order or cashier's check. Returned check activity may be subject to immediate termination of services.
8. 30 days' written notice is required prior to the last day of attendance. If I do not give proper notice, I agree to pay any fees or full tuition that may be due for the final month of care, regardless of my child(ren)'s attendance. I also understand any prepaid funds of \$20.00 or less which remains at the time of my child's disenrollment will not be remitted to me unless requested in writing within 90 days.
9. **CONTRACTED RATE:** Tuition rates are contracted based on the schedule provided below and are for care each week. Full time flat rate tuition is a discounted monthly tuition rate *divided over 10 months (September through June)*. Fees are not adjusted for breaks, closures, inclement weather days, or other unforeseen changes to the school year schedule. Please Note: If you choose to opt out of the flat rate at any point within the school year, you will not be able to opt back in until the following year.
10. **NON-CONTRACTED RATE:** Fluctuating schedules are available under the non-contracted rate and are subject to space availability. Contracted families will have priority. Calendars are due to the main office by the 20th of the previous

Child's Name: _____ Site: _____

month. Two sessions minimum is required. If a schedule is not submitted, or two sessions are not scheduled, a space hold fee in the amount of \$50.00 will be billed. Fees are not adjusted for closures, inclement weather days, or other unforeseen changes to the school year schedule.

11. Where other parties such as state or federal agencies (DSHS) pay a portion of or all of the childcare charges, I hereby agree to pay my participation of the charges, or all charges for any period the child is determined to be ineligible for the program, as well as all charges incurred which are properly charged toward the child under such programs. I understand it is my responsibility to ensure that coverage with outside agencies is kept current and up to date.
12. When seeking to obtain financial assistance through DSHS, I understand that DSHS coverage will be effective as of the date of receipt and that "back-dating" is not accepted, even if authorized by DSHS.
13. I understand that reauthorization of eligibility must be received from DSHS before the current end date of authorization or enrollment will be terminated. Re-enrollment will not be guaranteed and will not be considered until such time as proof of eligibility is provided.

DISCOUNTS AND PAYMENT

Only one discount can be applied per family. Discounts do not apply to families receiving DSHS subsidies. For families with multiple children in our care, the discount is applied to the oldest child's tuition. Discounts are applied to scheduled days only.

Payment Type (select one):

- ☐ Private Pay (please select one below)
☐ Employee*
☐ DSHS*

*additional forms required

Discounts (one per family):

- ☐ Sibling Discount
☐ Military Discount*
☐ CKSD or NKSD Employee Discount*

SCHEDULED ATTENDANCE – SCHOOL-AGE CARE

☐ I am opting for a **CONTRACTED schedule** and understand that my child will be scheduled weekly for the schedule I have indicated below.

☐ I am opting for a **NON-CONTRACTED schedule** and understand that submission of a calendar for the following month is required to be turned in by the 20th, and that space is subject to availability after contracted families.

AM Session Arrival Time: _____

PM Session Departure Time: _____

My child will attend the following sessions (mark all that apply with an "X")

	Monday	Tuesday	Wednesday	Thursday	Friday
AM Session					
PM Session					

Non-School Days (choose one):

- ☐ My child will attend on non-school days if they occur on a regularly scheduled day of care.
☐ My child will attend ALL non-school days, regardless of the day of the week.
☐ My child will NOT attend on non-school days.

I understand there is an additional fee for each day that my child is either scheduled for more than 10 hours or is in attendance for more than 10 hours. ☐ I will need care for my child over 10 hours per day due to _____.

ACKNOWLEDGMENT & AUTHORIZATION

I certify that I have read, understand, and accept all of the terms and conditions in this Agreement. This Agreement will be effective as of _____.

Parent/Guardian Signature (1) _____ Date _____

Parent/Guardian Signature (2) _____ Date _____

Staff Use Only

Date Received/Orientation Date: _____

By: _____

Center Director Signature: _____

Date: _____

Additional forms obtained:

- ☐ DSHS Award Letter
☐ DSHS Policies Agreement
☐ Employee Payroll Deduction Authorization
☐ NKSD Discount Form
☐ Military Discount Form
☐ CKSD Discount Form