

Extended Care Program Registration

Parent's Name(s):		
Stu	dent's Name and Grade:	
	1)	3)
2)		4)
Sele	ect the program option that best meet	s your family's needs.
	☐ Morning Care	\$40.00 per child
	☐ After School Care	\$135.00/ one child \$235.00/ two children \$305.00/ three children
	☐ Full-Time Care (Both Morning and Afternoon)	\$175.00/ one child \$315.00/ two children \$425.00/three children
	□ Drop-In Care	Morning: \$4.00 for each day your child attends. Afternoon: \$10.00 for each day your child attends *If your child attends more than 10 days per month in the morning, it is more economical to enroll in morning care. ** If your child attends more than 13 days per month in the afternoon, it is more economical to enroll in after school care.
Fees are	s are due on the 1^{st} of every month and wi billed at $\frac{1}{2}$ the program amount except for	per child will be charged upon enrollment. Il be billed to your FACTS account. August and December those in Drop-In Care which is billed weekly. It minute a student is not picked up by 6:00 pm. Subsequential
Pare	nt(Guardian) Name	
 Pare	ent (Guardian) Signature	