

APPLICATION FOR EXTENDED DAY PROGRAM
PLEASE RETURN ON OR BEFORE AUGUST 15TH.

FAMILY NAME: _____

CHILD'S LAST NAME IF DIFFERENT: _____

ADDRESS: _____

HOME PHONE: _____

EXTENDED DAY HOURS AVAILABLE:

7:00 a.m. – 8:00 a.m. 3:00 – 6:00 p.m.

\$25 non-refundable registration fee per FAMILY (must be attached).

Rate: \$6.00 per hour/per child

(Minimum charge of 15 minutes in the a.m., 30 minutes in the p.m.)

After 6:00 p.m. - charge is \$1.00 per minute

| Child(ren) Name | Grade | Room # |
|-----------------|-------|--------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

A calendar will be sent home monthly to enable parents to provide an updated schedule for the days the extended day program will be needed for the child(ren). An "Extended Day Emergency Information" form will need to be completed for each family using the program.

If there is a change in your plans to use the extended day program on a specific day, the school must be notified in writing. If an emergency arises, the office must be notified before 2:30 p.m. in order to advise the child and the extended day program.

Please note: You will be charged only for the days of actual attendance, as indicated by your signature on the attendance sheet.