



AFTER SCHOOL CHANGE FORM

Please submit this form if you have already registered for After School care and would like to change or cancel that registration.

Child's Name: _____ Today's date: _____

Parent Name: _____

Parent Phone: _____

Please indicate grade and requested schedule change below. Your payment will be adjusted in the next available FACTS withdrawal or, if you pay OVWS directly, an adjusted invoice will be sent.

Location: OVWS East Montpelier Campus

Grade in which child is enrolled:

- 1st
- 2nd
- 3rd
- 4th
- 5th
- 6th
- 7th
- 8th

***CURRENT after school
care schedule:***

- Mon 3:00-5:30
- Tues 3:00-5:30
- Wed 3:00-5:30
- Thurs 2:00-5:30
- Fri 3:00-5:30

***NEW after school
care schedule:***

- Mon 3:00-5:30
- Tues 3:00-5:30
- Wed 3:00-5:30
- Thurs 2:00-5:30
- Fri 3:00-5:30
- No after school care

New schedule effective the 1st of (month/year): _____

This must be a future month. Sorry, but changes cannot be made retroactively.

Parent signature: _____