

EXTENDED CARE SERVICES FORM

Student Name: _____

Class: _____

This form is to be completed ONLY if your child needs extended care hours outside of the Preschool Day, 9:30AM-12:30PM. Please check all that apply by filling in the **drop off time** for Morning Care, the **pick up time** for After Care and check off any Lunch Bunch days needed. All Extended Care Service rates are based on the hour. Please note Lunch Bunch is a 2-hour option only from 12:30PM – 2:30PM. Annual Tuition mount is a total of Preschool tuition and Extended Care tuition. The annual amount is broken down into 10 equal monthly payments due the first of the month beginning 8/1 and ending on 5/1.

<u>Extended Care Schedule</u>					
<u>EXTENDED CARE SERVICE</u>	<u>MONDAY</u>	<u>TUESDAY</u>	<u>WEDNESDAY</u>	<u>THURSDAY</u>	<u>FRIDAY</u>
Morning Care Drop Off Time 7:30-9:30AM					
LUNCH BUNCH 12:30pm-2:30pm 2 HRS/DAY					
After Care Drop Off Time 2:30-5:30PM					

For Office Use Only

TOTAL HOURS PER DAY					
Preschool Annual Tuition: _____			Extended Care Annual Tuition: _____		
ANNUAL TUITION TOTAL: _____			MONTHLY TUITION RATE: _____		

Parent Signature

Date

Staff Initials