

EXTENDED CARE SERVICES FORM

Student Name: _____

Class: _____

This form is to be completed **ONLY** if your child needs extended care hours outside of the 9:30AM – 12:30PM Preschool Day. Complete the form by filling in the **drop off time** for Morning Care under the days needed, the **pick up time** for After Care under the days needed and check off any Lunch Bunch days needed. All pre-registered Extended Care rates are billed by the half hour. Please note Lunch Bunch is a 2-hour option only from 12:30PM – 2:30PM. Your total tuition amount is the sum of Preschool tuition and Extended Care tuition for the year. The total annual amount is broken down into 10 equal 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 2:30-4:30PM					

For Office Use Only

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

Parent Signature

Date

Staff Initials