

## After School Sign-Up

My child(ren) \_\_\_\_\_ will attend:

### **First Dismissal After School Care (2:30-3:30):**

|        |         |           |          |
|--------|---------|-----------|----------|
| Monday | Tuesday | Wednesday | Thursday |
|        |         |           |          |
| Monday | Tuesday | Wednesday | Thursday |
|        |         |           |          |
| Monday | Tuesday | Wednesday | Thursday |
|        |         |           |          |
| Monday | Tuesday | Wednesday | Thursday |
|        |         |           |          |
| Monday | Tuesday | Wednesday | Thursday |
|        |         |           |          |

Total number of days: \_\_\_\_\_ x \$3.00 x number of children = \_\_\_\_\_

### **Second Dismissal After School Care (3:30-4:30)**

|        |         |           |          |
|--------|---------|-----------|----------|
| Monday | Tuesday | Wednesday | Thursday |
|        |         |           |          |
| Monday | Tuesday | Wednesday | Thursday |
|        |         |           |          |
| Monday | Tuesday | Wednesday | Thursday |
|        |         |           |          |
| Monday | Tuesday | Wednesday | Thursday |
|        |         |           |          |
| Monday | Tuesday | Wednesday | Thursday |
|        |         |           |          |

Total number of days: \_\_\_\_\_ x \$3.00 x number of children = \_\_\_\_\_

\*No care offered on Fridays. All school dismissal of 1:15 p.m.

**Total Cost:** \_\_\_\_\_

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Parent Signature