



26-27 Aftercare Reservation Form

Due Thursday, the week prior to service

Name _____ Week Attending _____

If you plan to keep the same schedule every week, you are only required to fill this form out once. **It will be your responsibility to alert the office of any changes to your schedule.** If your schedule will change weekly, please submit a new form by Thursday, the week prior to service.

_____ Please use this same schedule every week and I will alert the office of any changes.
Initial here

Enter Date:	Pickup Time	List student(s) attending: name & grade
Monday		1. 2. 3. 4.
Tuesday		1. 2. 3. 4.
Wednesday		1. 2. 3. 4.
Thursday		1. 2. 3. 4.
Friday		1. 2. 3. 4.

Pricing per child:

Picking up between: 2:30 PM to 4:15 PM \$15.00
4:15 PM to 5:30 PM \$25.00

Annual registration fee \$25.00 per family

Add \$5.00 per child for every 5 minutes after 5:30pm up to 6:00pm

Add \$50.00 per child for every 15 minutes after 6:00pm

Parent/Guardian name, printed & signed - required