

## Aftercare Registration September 2019

Directions: Write the first name of the student(s) in each session requested. Example listed in bolded boxes below. Continue to next page to verify dates, times, and payment.

Time	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
	<b>*** Example ***</b>	September 3rd	September 4th	September 5th	September 6th
12:15-2:50pm	<b>John &amp; Suzie Smith</b>	Holiday/Recess			
2:50-4:00pm	John Smith	Holiday/Recess			
4:00-5:00pm	John Smith	Holiday/Recess			
5:00-6:00pm		Holiday/Recess			
	September 9th	September 10th	September 11th	September 12th	September 13th
12:15-2:50pm					
2:50-4:00pm					
4:00-5:00pm					
5:00-6:00pm					
	September 16th	September 17th	September 18th	September 19th	September 20th
12:15-2:50pm					
2:50-4:00pm					
4:00-5:00pm					
5:00-6:00pm					
	September 23rd	September 24th	September 25th	September 26th	September 27th
12:15-2:50pm					
2:50-4:00pm					
4:00-5:00pm					
5:00-6:00pm					
	September 30th				
12:15-2:50pm					
2:50-4:00pm					
4:00-5:00pm					
5:00-6:00pm					

## Aftercare Registration September 2019

Time Of Care	Pre-Registration	Drop-In
12:15-2:50pm	\$20.00	\$25.00
2:50-4:00pm	\$8.00	\$10.00
4:00-5:00pm	\$6.00	\$8.00
5:00-6:00pm	\$6.00	\$8.00

\* Note: For Aftercare pre-registration prices, please return this form to the office no later than **Wednesday, September 4th**

(Prices are per child)

Student Name	Grade	# of Sessions 12:15p-2:50p	# of Sessions 2:50p-4:00p	# of Sessions 4:00p-5:00p	# of Sessions 5:00p-6:00p	
<b>Number of Days Totals:</b>						
<b>Cost per Day:</b>		\$20/\$25	\$8/\$10	\$6/\$8	\$6/\$8	
<b>Cost Totals:</b>						<b>Grand Total=</b>

Parent Name(s): \_\_\_\_\_ Phone Number(s): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Payment Options (select one):

- Enclosed is my payment for \$ \_\_\_\_\_ paid by (circle one): Check Cash Credit Card  
 received by: \_\_\_\_\_ on (date): \_\_\_\_\_
- Add to my FACTS account amount due in September

### Office Use ONLY:

Date form was received: \_\_\_\_\_  
 Pre-registration or drop in? \_\_\_\_\_  
 Date family was billed: \_\_\_\_\_  
 Method of billing: \_\_\_\_\_  
 Processed by (staff name): \_\_\_\_\_