



2008-2009

Schedule of Attendance

Child's/ Children's Name(s): _____

Parent's Name: _____

Daytime Phone #: _____

Please indicate your child's schedule by checking one or more of the boxes below.

<input type="checkbox"/> Before Only Weekly	
<i>Kindergarten</i>	<i>Kindergarten</i>
<input type="checkbox"/> After Only Weekly	<input type="checkbox"/> Before & After Weekly
<input type="checkbox"/> After Only Monthly	<input type="checkbox"/> Before & After Monthly
<i>Grades 1-5</i>	<i>Grades 1-5</i>
<input type="checkbox"/> After Only Weekly	<input type="checkbox"/> Before & After Weekly
<input type="checkbox"/> After Only Monthly	<input type="checkbox"/> Before & After Monthly
<input type="checkbox"/> One Hour	<input type="checkbox"/> One Hour Monthly
<input type="checkbox"/> Daily	
M T W T H F	
(please circle)	

Note: When enrolling for the entire school year the **Monthly Rate** option is available. The rate is based on 36 weeks (4- nine week grading periods) of school and is divided into nine equal monthly payments paid from September through May. The program must begin by September 1 of each year. If you change your schedule or withdraw from the program before the end of the school year, additional fees will apply. These fees will be calculated based on the weekly rate and on the length of time that care was provided. All programs are for five days per week with the exception of the **Daily Rate** program.