



Before & After School CARES Program for OCTOBER, 2017

Name: _____ Grade: _____
 Name: _____ Grade: _____
 Name: _____ Grade: _____

Due: 09-26-17

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	3 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	4 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	5 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	6 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	7
8	9 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	10 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	11 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	12 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	13 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	14
15	16 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	17 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	18 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	19 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	20 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	21
22	23 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	24 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	25 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	26 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	27 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	28
29	30 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM	31 <input type="checkbox"/> 7:00 to 8:00 AM <input type="checkbox"/> 3:15 to 4:30 PM <input type="checkbox"/> 3:15 to 6:00 PM				

Please ✓ the times on the days your child will be with us. *Thank you!*

Early Drop Off ~ 7:00 to 8:00 AM

____ Days x \$9.00 = \$_____ (1) Child ____ Days x \$16.00 = \$_____ (2) Children ____ Days x \$23.00 = \$_____ (3) Children
 ____ Monthly Drop Off = \$160.00 (1) Child ____ Monthly Drop Off = \$300.00 (2) Children ____ Monthly Drop Off = \$425.00 (3) Children

Pick-Up Before 4:30 PM

____ Days x \$13.00 = \$_____ (1) Child ____ Days x \$23.00 = \$_____ (2) Children ____ Days x \$32.00 = \$_____ (3) Children
 ____ Monthly Pick-Up = \$150.00 (1) Child ____ Monthly Pick-Up = \$270.00 (2) Children ____ Monthly Pick-Up = \$380.00 (3) Children

Pick-Up Before 6:00 PM

____ Days x \$22.00 = \$_____ (1) Child ____ Days x \$40.00 = \$_____ (2) Children ____ Days x \$55.00 = \$_____ (3) Children
 ____ Monthly Pick-Up = \$225.00 (1) Child ____ Monthly Pick-Up = \$405.00 (2) Children ____ Monthly Pick-Up = \$570.00 (3) Children

