CHILDRENS NAMES:

ATTENDING SCHOOL:

DEC 2020

FULL DAY CARE

(school aged)

**MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY**

**Number of days:**  **X**

$ 40.00 **/day=**

WEEK OF: 11/30

Nov 30

Dec 1 Dec 2 Dec 3 Dec 4

CARE NEEDED

:

WEEK OF: 12/7

**FULL:**

Dec 7

FULL:

Dec 8

FULL:

Dec 9

FULL:

FULL:

Dec 10 Dec 11

CARE NEEDED

:

**FULL:**

**FULL:**

**FULL:**

**FULL:**

**FULL:**

WEEK OF: 12/14

Dec 14 Dec 15

Dec 16

Dec 17 Dec 18

CARE NEEDED

:

**FULL:**

**FULL:**

**FULL:**

**FULL:**

**FULL:**

WEEK OF:12/21

Dec 21 Dec 22 Dec 23

ALL PROGRAMS CLOSED

ALL PROGRAMS CLOSED

CARE NEEDED:

**FULL:**

**FULL:**

**FULL:**

STEPS FOR CARE CALCULATION:

1. **Mark 1 next to each day you will need care. Daily rate covers full day session 730a-500p per day and cannot be prorated.**
2. **Total the Number of Days signing up for. Payment must accompany calendar to reserve spot. Minimum of 3 days/week required.**
3. **Limited space available. Payment is due AT LEAST by the Wednesday prior to the upcoming week, but it is encouraged earlier in order to increase possibility of spot. Calendars are also required for CCAP families to reserve their space.**

DUES CALCULATION:

\*\*Spots reserved on first paid/scheduled basis. No spot is guaranteed until paid/confirmed. \*\*MIN 3 days/week required

X Number of Children=

# $

DROP-INS NOT AVAILABLE AT THIS TIME.\*\*

\*\*FULL DAY PROGRAMS WILL BE CANCELLED IF/WHEN SCHOOL SESSIONS RESUME AT THE FULL DAY SITE\*\*

**TOTAL DUE:** $