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| **AUGUST 2021 ATTENDING SCHOOL:** **CHILDRENS NAMES:**  CIRCLE ONE  |
|  |  |  | **MONDAY** | **TUESDAY** | **Before/After****WEDNESDAY** | **Tuition****THURSDAY** | **FRIDAY** |
| **WEEK OF: 8/16** |  |  | **Aug 16** | **Aug 17** | **Aug 18** | **Aug 19** | **Aug 20** |
| **8/20 full day Thom** |  |  |  | **Before:**  | **Before:**  | **Before:**  | **Before:**   |
|  |  |  | NO PROGRAM | **After:**  | **After:**  | **After:**  | **After: FULL:**  |
| **WEEK OF: 8/23** |  |  | **Aug 23** | **Aug 24** | **Aug 25** | **Aug 26** | **Aug 27** |
| **8/23 full day Thom Before:**  **FULL:** | **Before:**  | **Before:**  | **Before:**  | **Before:**   |
| **8/27 full day Deane After:**   | **After:**  | **After:**  | **After:**  | **After: FULL:**  |
| **WEEK OF: 8/30** |  |  | **Aug 30** | **Aug 31** | **Sept 1** | **Sept 2** | **Sept 3** |
| **9/2,9/3 full day GH Before:**  | **Before:**  | **Before:**  | **Before:**   | **Before:**   |
| **After:**  | **After:**  | **After:**  | **After:**  FULL: | **After: FULL:**  |
|  |  |  |  |  |
| **STEPS FOR CARE CALCULATION:** |
| 1. **Enter 1 next to the before/after sessions you will need care. '0' means NO CARE; '1' means NEED CARE.**
2. **Confirm number of Before and After School sessions are correct below. Add number of children and confirm/add total.**
3. **Payment must accompany calendar to reserve spot. Reduced tuition rate only given once proof of F/R status through school.**
4. **Limited space available. Payment is due by the Wednesday of the prior week, however we do encourage earlier payments to secure a spot. Calendars are also required for CCAP families to reserve their space.**
5. **For Safety and tracking purposes, please inform Director of any care schedule changes. NO refunds or credits for unused care.**
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| **DUES CALCULATION:** |  | **Before Care Sessions:** **X** | $ 9 $  |  | $  |
|  |  |  |  |  |  |
|  |  | **After Care Sessions:**  **X** | $ 19 $  |  |  |
|  |  |  |  |  |  |
| **Full day Care Sessions:**  **X** $ 40 $ X Number of Children= |
| **\*Must provide proof of Free/Reduced qualification to select $1/session reduced TOTAL DUE:** $ **tuition rate. Must be manually chosen- Standard rate is automatically selected.** |
| **$5/session ($10/full day) drop-in fee applies to all payments/schedules not received by Wednesday for upcoming week.** |

Deane

Glennon Heights

Molholm

Slater Thomson