

Prince of Peace Extended Care Program Registration Form

2018-2019

Parent Names: _____

Address: _____

Home/Cell Number: _____

Parent Emails: _____

Student Name(s)	Grade	Monday	Tuesday	Wednesday	Thursday	Friday
		AM / PM	AM/ PM	AM/ PM	AM / PM	AM / PM

My Schedule will vary: Yes _____ No _____

I wish to use Extended Care on a Drop-in Basis: Yes _____ No _____

AM 6:30 until 7:15

(Pre-Kindergarten until 8:30)

DAILY:

\$7 per day, first student
 \$14 per day, two students
 \$21 per day, three students

WEEKLY:

\$30 per week, first student
 \$65 per week, two students
 \$100 per week, three students

PM 2:15 * until 6pm

DAILY:

\$15 per day, first student
 \$27 per day, two students
 \$37 per day, three students

WEEKLY:

\$70 per week, first student
 \$130 per week, two students
 \$180 per week, three students

PRE-KINDERGARTEN

11:30am-2:15pm*

DAILY:

\$10 per day

*3:00 pm on Fridays