

Easter Holiday Care

This year we will be offering Holiday Care during our Easter holiday. It will be offered on Thursday, April 18th, Monday, April 22nd, and Tuesday, April 23rd. You may choose 1, 2, or all 3 days if you like. The time will be from 9:00 AM until 3:00 PM. The cost will be \$45.00 per day per child. If you have two children the cost will be \$60.00, and for three children it will be \$80.00 per day. Before care will be offered from 7:30 AM until 9:00 AM for an extra fee of \$5.00 per child. If your child enters before 9:00AM, they will be considered in Before Care. Your child will be given a lunch which will include a drink, pizza, fruit, vegetable and a dessert. We will also have chips and other snacks as the day goes on. We will have outside and inside play, games, and a movie on the big screen. Your child may bring any hand-held electronics, games, toys, etc. on this day. Please label all items with their name. We are not responsible for lost items. After Care will be available from 3:00PM - 6:00PM for a fee of \$4.00 per hour per child. Pick up will be at 6:00PM promptly.

*****\$1.00 per minute after 6:00 *****

This is open and available to all children in Pre K3 - 7th grade who attend St. Francis Xavier School. Please fill out the permission slip on the back and return it with a check payable to CASH for the correct amount. Please DO NOT include Before Care or After Care payments in the check. Before Care and After Care payments should be paid on the day of service and in CASH only. Please have all slips and payments in no later than Wednesday, April 10th. Place them in an envelope marked "Holiday Care – Mrs. Renee Room 101".

-Mrs. Renee, Ms. Elaine, & Mrs. Kelly

Easter Holiday Care

Child's Name _____ Age _____

Child's Name _____ Age _____

Child's Name _____ Age _____

Parent's Cell Number _____

Parent's email address _____

In case of emergency, I give permission to have emergency care administered.

Parent's Signature _____

My child/children will attend the following day/days: (Please circle)

Thursday, April 18th

Monday, April 22nd

Tuesday, April 23rd

I have enclosed a check in the amount of _____.

***Before Care and After Care payments are to be paid in Cash on the day of service. ***