

FAMILY LAST NAME

CHILDS FIRST NAME

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January 2024

Monday	Tuesday	Wednesday	Thursday	Friday
FEE SCHEDULE Before School Care 6:45 - 7:45 am \$3.00 per child After School Care 2:55 - 5:00 pm \$6.50 first \$5.50second \$4.50 addt'l \$19 max per family 2:55 - 6:00 pm \$8.50 first \$7.50 second \$6.50 addt'l \$25 max per family		Calendars & payments are due the prior month on the 26th. After the 1st there is a \$10 late fee. Thank You		Office use only Total \$ _____ Days X AM _____ Days X PM _____

1 <div style="font-size: 2em; color: red; font-weight: bold;">Tiger Care Closed</div>	2	3 (Please Circle) AM Yes PM : 5:00 6:00	4 (Please Circle) AM Yes PM : 5:00 6:00	5 (Please Circle) AM Yes PM : 5:00 6:00
8 (Please Circle) AM Yes PM : 5:00 6:00	9 (Please Circle) AM Yes PM : 5:00 6:00	10 (Please Circle) AM Yes PM : 5:00 6:00	11 (Please Circle) AM Yes PM : 5:00 6:00	12 (Please Circle) AM Yes PM : 5:00 6:00
15 <div style="font-size: 2em; color: red; font-weight: bold;">Tiger Care Closed</div>	16 (Please Circle) AM Yes PM : 5:00 6:00	17 (Please Circle) AM Yes PM : 5:00 6:00	18 (Please Circle) AM Yes PM : 5:00 6:00	19 (Please Circle) AM Yes PM : 5:00 6:00
22 <div style="font-size: 2em; color: red; font-weight: bold;">Tiger Care Closed</div>	23 (Please Circle) AM Yes PM : 5:00 6:00	24 (Please Circle) AM Yes PM : 5:00 6:00	25 (Please Circle) AM Yes PM : 5:00 6:00	26 (Please Circle) AM Yes PM : 5:00 6:00
29 (Please Circle) AM Yes PM : 5:00 6:00	30 (Please Circle) AM Yes PM : 5:00 6:00	31 (Please Circle) AM Yes PM : 5:00 6:00	1 (Please Circle) AM Yes PM : 5:00 6:00	2 (Please Circle) AM Yes PM : 5:00 6:00