

FAMILY LAST NAME

CHILDS FIRST NAME

1
3

2
4

May/June 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

Days X AM _____ Days X PM _____

Office use only

Total \$ owed month

1 (Please Circle)

AM Yes

PM : 5:00

6:00

2 (Please Circle)

AM Yes

PM : 5:00

6:00

3 (Please Circle)

AM Yes

PM : 5:00

6:00

6 (Please Circle)

AM Yes

PM : 5:00

6:00

7 (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

13 (Please Circle)

AM Yes

PM : 5:00

6:00

14 (Please Circle)

AM Yes

PM : 5:00

6:00

15 (Please Circle)

AM Yes

PM : 5:00

6:00

16 (Please Circle)

AM Yes

PM : 5:00

6:00

17 (Please Circle)

AM Yes

PM : 5:00

6:00

20 (Please Circle)

AM Yes

PM : 5:00

6:00

21 (Please Circle)

AM Yes

PM : 5:00

6:00

22 (Please Circle)

AM Yes

PM : 5:00

6:00

23 (Please Circle)

AM Yes

PM : 5:00

6:00

24 (Please Circle)

AM Yes

PM : 5:00

6:00

27

Tiger Care Closed

28 (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

3 (Please Circle)

AM Yes

PM : 5:00

6:00

4 (Please Circle)

AM Yes

PM : 5:00

6:00

