

Child's name: \_\_\_\_\_ Parent's Name: \_\_\_\_\_

## OCTOBER 2017

# ★ EXTENDED DAY SENIOR ★

Monday	Tuesday	Wednesday	Thursday	Friday	Week's total:
10/2 \$16	10/3 \$16	10/4 \$16	10/5 \$16	10/6 <b>No School Staff Day</b>	\$ _____
10/9 <b>No School Columbus Day</b>	10/10 \$16	10/11 \$16	10/12 \$16	10/13 \$16	\$ _____
10/16 \$16	10/17 \$16	10/18 \$16	10/19 \$16	10/20 \$16	\$ _____
10/23 \$16	10/24 \$16	10/25 \$16	10/26 \$16	10/27 \$16	\$ _____
10/30 \$16	10/31 \$16				\$ _____
<div style="border: 1px solid black; padding: 5px; margin: 5px auto; width: 80%;"> <p><b>Daily rate: \$16.00</b></p> <p><b>Minimum Day Rate: \$18.00</b></p> <p><b>Yearly registration fee: \$30 per child</b></p> <p><b>For guaranteed schedule, sign up and pay by the 15<sup>th</sup> for the coming month. No credit for cancelled days.</b></p> </div>				<b>Week's total</b> \$ _____  <b>+Annual reg. fee</b> <b><u>+ \$30</u></b>  <b>TOTAL</b> \$ _____	

I authorized the use of this credit card for the above payments. **(Circle one)**

**Mastercard    Visa    American Express    Discover**

Cr. Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV Code \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Please use your green Ext. Day Senior notes every day your child attends our program!**