

**BEFORE & AFTER CARE REGISTRATION FORM**

This form must be filled out each month that you wish for your child to stay extended day or come early for breakfast room. If we do not have this form by the due date above, we cannot guarantee that we will have space for your child. There is a \$20 late charge if this form is turned in after the due date.

Child's Name \_\_\_\_\_ Month: **November 2017**

**Please circle the dates and times you need for your child:**

Early Morning	Monday	Tuesday	Wednesday	Thursday	Friday
7:30-9:00	6, 13	7, 14	1, 8, 15	2, 9, 16	3, X
\$7.00/day	20, 27	21, 28	X, 29	X, 30	17, X

**\*Lunch & nap groups for infants, toddlers, 2's, 3's and 4's who aren't doing Educational Enrichment  
(Please circle only 1 choice per day!)**

Lunch Groups	Monday	Tuesday	Wednesday	Thursday	Friday
12:00-1:00	6, 13	7, 14	1, 8, 15	2, 9, 16	3, X
\$11.50/day	20, 27	21, 28	X, 29	X, 30	17, X
12:00-3:00	6, 13	7, 14	1, 8, 15	2, 9, 16	3, X
\$18.75/day	20, 27	21, 28	X, 29	X, 30	17, X
12:00-6:00	6, 13	7, 14	1, 8, 15	2, 9, 16	3, X
\$25.50/day	20, 27	21, 28	X, 29	X, 30	17, X

**\*Pre-K Educational Enrichment is for children in the 4's classes only and runs in two semesters.  
Weekly schedule (12:00-3:00) must remain the same for Aug-Dec. You may set a new schedule for Jan-May. Late day (3:00-6:00) is not restricted.**

4's Enrichment	Monday	Tuesday	Wednesday	Thursday	Friday
12:00-3:00	6, 13	7, 14	1, 8, 15	2, 9, 16	3, X
\$23.75/day	20, 27	21, 28	X, 29	X, 30	17, X
3:00-6:00	6, 13	7, 14	1, 8, 15	2, 9, 16	3, X
\$7.25/day	20, 27	21, 28	X, 29	X, 30	17, X

**There are 18 school days in November. MON-4, TUE-4, WED-4, THUR-4, FRI-2  
No School: Nov 10<sup>th</sup> – Conferences, Nov 22<sup>nd</sup> – 24<sup>th</sup> – Thanksgiving Break**

	# of Days	Daily Rate	Everyday	Amount owed
7:30 – 9:00		@ \$7.00 per day	\$126.00	
12:00 – 1:00		@ \$11.50 per day	\$207.00	
12:00 – 3:00		@ \$18.75 per day	\$337.50	
12:00 – 6:00		@ \$25.50 per day	\$459.00	
4's enrichment 12:00-3:00		@ \$23.75 per day	\$427.50	
4's 3:00-6:00		@ \$7.25 per day	\$130.50	
<b>Total</b>				
<b>Less 20% for Synagogue Member</b>				
<b>Late Fee-After due date add \$20.00</b>				
<b>Amount Owed</b>				

\*If check/cash is not submitted with this form your credit/debit card will be processed for the full amount on or around the 10th of November.

Check # \_\_\_\_\_ attached for payment in full.

Signature \_\_\_\_\_