



For Office Use Only

Cash/Check # _____

Date _____

Amount \$ _____

LUNCH BUNCH

October 1st – October 31st

Please complete the form below to allow us to plan for your child's Lunch Bunch Schedule.

Please note that the program requires advance payment.

Child's Name _____

Step 1: On the calendar below, mark and "X" over each Day that you plan to use the Lunch Bunch option.
Note: Shaded days are not available for the program.

Step 2: Total the number of Lunch Bunch days. Total Days _____

Step 3: Multiply the total days times \$10 per day. x \$10.00

Total Due \$ _____ .00

October 2016						
S	M	T	W	T	F	S
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					



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Cash/Check # _____

Date _____

Amount \$ _____

LUNCH BUNCH & AFTER SCHOOL

October 1st to October 31st

Please complete the form below to allow us to plan for your child's Lunch Bunch & After School Schedule. Please note that the program requires advance payment.

Child's Name _____

Step 1: On the calendar below, mark and "X" over each Day that you plan to use the Lunch Bunch & After School option.
Note: Shaded days are not available for the program.

Step 2: Total the number of Lunch Bunch & After School days. Total Days _____

Step 3: Multiply the total days times \$25 per day. x \$25.00

Total Due \$ _____ .00

October 2016						
S	M	T	W	T	F	S
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					



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Cash/Check #	_____
Date	_____
Amount \$	_____

Further Extended Hours
 October 1st – October 31st

Please complete the form below to allow us to plan for your child's Further Extended Hours School Schedule.
Please note that the program requires advance payment.

Child's Name _____

Step 1: If utilizing the further extended hours, please fill in the morning drop off and pick up times on the calendar below. Outside of school day hours, 8:30am to 2:30pm, the following drop off and pick up times are available.
Drop off: 7:00am, 7:30am, 8:00am
Pick Up: 3:00pm, 3:30pm, 4:00pm
Note: Shaded days are not available for the program.

Step 2: Total the number of hours. Total Hours _____

Step 3: Multiply the total hours by \$10 per half hour. x \$10.00

Total Due \$ _____ .00

October 2016						
S	M	T	W	T	F	S
2	3	4	5 AM _____ PM _____	6 AM _____ PM _____	7 AM _____ PM _____	8
9	10	11 AM _____ PM _____	12	13 AM _____ PM _____	14 AM _____ PM _____	15
16	17 AM _____ PM _____	18 AM _____ PM _____	19 AM _____ PM _____	20 AM _____ PM _____	21 AM _____ PM _____	22
23	24 AM _____ PM _____	25 AM _____ PM _____	26 AM _____ PM _____	27 AM _____ PM _____	28 AM _____ PM _____	29
30	31					