

Child's Name: _____

School: _____

August 2022

Monday	Tuesday	Wednesday	Thursday	Friday	
8/1 No School Extended Hours Not in Session	8/2 No School Extended Hours Not in Session	8/3 No School Extended Hours Not in Session	8/4 No School Extended Hours Not in Session	8/5 No School Extended Hours Not in Session	
8/8 No School Extended Hours Not in Session	8/9 No School Extended Hours Not in Session	8/10 First day of school!! <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/11 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/12 <input type="checkbox"/> Before School <input type="checkbox"/> Early Release	Total \$ for Week: \$ _____
8/15 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/16 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/17 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/18 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/19 <input type="checkbox"/> Before School <input type="checkbox"/> Early Release <i>*Reservation/Cancellation Deadline for Sep. 6 Full Day</i>	Total \$ for Week: \$ _____
8/22 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/23 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/24 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/25 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/26 <input type="checkbox"/> Before School <input type="checkbox"/> Early Release	Total \$ for Week: \$ _____
8/29 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/30 <input type="checkbox"/> Before School <input type="checkbox"/> After School	8/31 <input type="checkbox"/> Before School <input type="checkbox"/> After School			Total \$ for Week: \$ _____

Please select days your child will be attending. Prepayment for week is due prior to attendance.