

Child's Name: _____

School: _____

January 2023

Monday	Tuesday	Wednesday	Thursday	Friday	
1/2 EXTENDED HOURS CLOSED	1/3 No School In Session Full Day Reservations Required Cancellation Deadline: Dec. 9	1/4 No School In Session Full Day Reservations Required Cancellation Deadline: Dec. 9	1/5 No School In Session Full Day Reservations Required Cancellation Deadline: Dec. 9	1/6 No School In Session Full Day Reservations Required Cancellation Deadline: Dec. 9 <i>*Reservation/Cancellation Deadline for 1/16-1/17 Full Days</i>	Total \$ for Week: \$ _____
1/9 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/10 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/11 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/12 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/13 <input type="checkbox"/> Before School <input type="checkbox"/> Early Release	Total \$ for Week: \$ _____
1/16 No School In Session Full Day Reservations Required Cancellation Deadline: Jan. 6	1/17 No School In Session Full Day Reservations Required Cancellation Deadline: Jan. 6	1/18 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/19 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/20 <input type="checkbox"/> Before School <input type="checkbox"/> Early Release	Total \$ for Week: \$ _____
1/23 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/24 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/25 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/26 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/27 <input type="checkbox"/> Before School <input type="checkbox"/> Early Release	Total \$ for Week: \$ _____
1/30 <input type="checkbox"/> Before School <input type="checkbox"/> After School	1/31 <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.