



Extended Care Registration

May 2010

Student Name: _____

Grade Level: _____ Teacher: _____

Day	Date	AM Care	PM Care
Monday	3		
Tuesday	4		
Wednesday	5		
Thursday	6		
Friday	7		
Monday	10		
Tuesday	11		
Wednesday	12		
Thursday	13		
Friday	14		
Monday	17		
Tuesday	18		
Wednesday	19		
Thursday	20		
Friday	***21		
Monday	24		
Tuesday	25		
Wednesday	26		
Thursday	27		
Friday	28		

Total Days	<input type="text"/>	<input type="text"/>
	x	x
	\$2.00	\$5.50
	+	=
	<input type="text"/>	<input type="text"/>

***** Please note:**

 **LS Spring Program**
Friday, May 21st

Minimum Day for PK – 5th only

Memorial Day – School Closed



Monday, May 31st

Office Use Only:

Cash Amt. _____
 Check # _____
 Check Amt. _____
 Date _____
 Split _____

Please remember to send in your payment with this registration form. Thank you!

Deadline: Friday, April 23rd

“For the Lord is the great God, the great King above all gods.”

Psalms 95:3 (NIV)