

# Prince of Peace Extended Care Program Registration Form

Parent Names: \_\_\_\_\_

Address: \_\_\_\_\_

Home/Cell Number: \_\_\_\_\_

Parent Emails: \_\_\_\_\_

Student Name(s)	Grade	Monday	Tuesday	Wednesday	Thursday	Friday
		AM / PM	AM/ PM	AM/ PM	AM / PM	AM / PM

My Schedule will vary: Yes \_\_\_\_\_ No \_\_\_\_\_

I wish to use Extended Care on a Drop-in Basis: Yes \_\_\_\_\_ No \_\_\_\_\_

## AM 6:30 until 7:15

(Pre-Kindergarten until 8:30)

### DAILY:

\$7 per day, first student  
\$14 per day, two students  
\$21 per day, three students

### WEEKLY:

\$30 per week, first student  
\$65 per week, two students  
\$100 per week, three students

## PM 2:15 \* until 6pm

### DAILY:

\$15 per day, first student  
\$27 per day, two students  
\$37 per day, three students

### WEEKLY:

\$70 per week, first student  
\$130 per week, two students  
\$180 per week, three students

## PRE-KINDERGARTEN

11:30am-2:15pm\*

### DAILY:

\$10 per day