

**AFTER CARE** MONTHLY SCHEDULE FORM

**(PRE PAYMENT MUST ACCOMPANY REQUEST)**

EDP SCHEDULE FOR: MARCH 30 – MAY 1

DUE: MONDAY, MARCH 23, 2026

FAMILY NAME: \_\_\_\_\_

CHILD NAME: \_\_\_\_\_

HOMEROOM: \_\_\_\_\_

CHILD NAME: \_\_\_\_\_

HOMEROOM: \_\_\_\_\_

CHILD NAME: \_\_\_\_\_

HOMEROOM: \_\_\_\_\_

CHILD NAME: \_\_\_\_\_

HOMEROOM: \_\_\_\_\_

BE SURE TO CIRCLE THE DAYS OF THE WEEK YOU WISH TO USE.

BE SURE TO CIRCLE YOUR PICK UP TIME / CHARGE FOR THE MONTH

CHILDREN WILL BE SCHEDULED FOR THE SAME DAYS EACH WEEK...NO EXCEPTIONS!

<u>DAYS PER WEEK</u>			<u>CIRCLE DAY(S)</u>	<u>CIRCLE CHARGE FOR THE MONTH</u>		
				<u>6:00</u>	<u>5:00</u>	<u>4:00</u>
5 DAYS/WEEK:	M	T	W TH F	\$301	\$222	\$141
4 DAYS/WEEK:	M	T	W TH F	\$240	\$176	\$113
3 DAYS/WEEK:	M	T	W TH F	\$180	\$131	\$85
2 DAYS/WEEK:	M	T	W TH F	\$120	\$89	\$57
1 DAY /WEEK:	M	T	W TH F	\$61	\$45	\$28

In case of emergency:

ADD ON RATE per DAY per CHILD

\$18      \$14      \$10

WHEN USING MONTHLY SCHEDULE

A **\$5 LATE FEE** per child per day is applied for pickups after the scheduled time. Late Fees and emergency Add On days are billed after the end of the month.

CHECK# \_\_\_\_\_ AMOUNT PAID \_\_\_\_\_

Monthly charge due \_\_\_\_\_

BALANCE DUE \_\_\_\_\_

Number of Children \_\_\_\_\_

Total this month \_\_\_\_\_

Prior Balance due \_\_\_\_\_

TOTAL NOW DUE: \_\_\_\_\_

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