



## Before and After School Care Request

Please complete and submit to Marie

<i>Child Name</i>				
Select what day and session you are requesting:				\$20/day
<input type="checkbox"/> Monday AM	<input type="checkbox"/> Tuesday AM	<input type="checkbox"/> Wednesday AM	<input type="checkbox"/> Thursday AM	
8:00 - 9:00am	8:00 - 9:00am	8:00 - 9:00am	8:00 - 9:00am	
<input type="checkbox"/> Monday PM	<input type="checkbox"/> Tuesday PM	<input type="checkbox"/> Wednesday PM	<input type="checkbox"/> Thursday PM	
3:15 - 5:00pm	3:15 - 5:00pm	3:15 - 5:00pm	3:15 - 5:00pm	
This request is for the week of:				
Repeated Occurrence: <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly				