

April 2011 – Kindercare

Name: _____

School: _____

AM Care & KC ___ x \$16.00/day= \$ _____	KC & PM Care ___ x \$19.00/day= \$ _____		AM Care & KC & PM Care ___ x \$23.00/day= \$ _____
Kindercare Only ___ x \$13.00/day= \$ _____	PM Only (NO KC) ___ x \$10.00/day= \$ _____	AM Only (No KC) ___ x \$7.00/day= \$ _____	Pro D/Seasonal Breaks ___ x \$25.00/day= \$ _____

TOTAL = \$ _____

All days booked are paid for and are non-negotiable, non-refundable or credited. **Calendars and payments are due no later than Thursday, March 17th, 2011 or you may not be assured a spot.** Please refer to 4.3 of the parent

Parent Signature

	Monday	Tuesday	Wednesday	Thursday	Friday
AM					1
AM K/C					
PM K/C					
PM					
AM	4	5	6	7	8
AM K/C					
PM K/C					
PM					
AM	11	12	13	14	Pro D Day 15
AM K/C					
PM K/C					
PM					
AM	18	19	20	21	Closed 22 Good Friday
AM K/C					
PM K/C					
PM					
AM	Closed 26 Easter Monday	27	28	29	30
AM K/C					
PM K/C					
PM					

SUPERVISOR USE ONLY

Date Calendar Received: _____ Total Amount Billed: \$ _____

Subsidy Amount Claimed: \$ _____ Claim #: _____ Date Subsidy Claim Submitted _____

Parent Portion Amount \$ _____ Date Billed: _____

Cheque Amount \$ _____ Cheque # _____ Cheque Date: _____

Cash Amount \$ _____ Receipt # _____ Date Received: _____

I accept the "Total Amount Billed" is true and correct.

Staff Initials