

Child's Name: \_\_\_\_\_ Centre: \_\_\_\_\_

<b>AM &amp; PM</b> ___ x \$19.50/day= \$ _____	<b>AM Only</b> ___ x \$11.00/day= \$ _____
<b>Pro D/Seasonal Breaks</b> ___ x \$33.00/day= \$ _____	<b>PM Only</b> ___ x \$14.50/day= \$ _____
<b>Drop In Fee</b> ___ x \$3.00/day= \$ _____	<b>TOTAL = \$</b> _____

All days booked are paid for in advance and are non-refundable, non-negotiable or credited. Drop in fee is charged on all drop in dates please refer to section 5.7 of the parent handbook. Calendars are due no later than Wednesday January 15th, 2020 to guarantee your space. If PAD/PAC is not in place, calendar must be paid in full when submitting. Please refer to 5.3 of the parent handbook.

\_\_\_\_\_

Parent Signature

	Monday	Tuesday	Wednesday	Thursday	Friday
<b>AM</b>	3	4	5	6	7
<b>PM</b>					
<b>AM</b>	10	11	12	13	<b>Pro D Day 14</b>
<b>PM</b>					
<b>AM</b>	<b>**Closed**</b> 17	18	19	20	21
<b>PM</b>	<b>Family Day</b>				
<b>AM</b>	24	25	26	27	28
<b>PM</b>					
<b>AM</b>					
<b>PM</b>					

**STAFF USE ONLY**

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

Subsidy Amount Claimed: \$ \_\_\_\_\_ Claim #: \_\_\_\_\_ Date Subsidy Submitted: \_\_\_\_\_ Subsidy Paid: \$ \_\_\_\_\_

Parent Portion Amount \$ \_\_\_\_\_ Date Billed: \_\_\_\_\_

Stripe Payment Amount \$ \_\_\_\_\_ Stripe Date: \_\_\_\_\_

Debit/Credit Amount \$ \_\_\_\_\_ Receipt/Approval # \_\_\_\_\_ Date Received: \_\_\_\_\_

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

\_\_\_\_\_  
Staff Initials