

March 2020

Child's Name: _____

PAC PAD ACCB Ministry

Centre: _____



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

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 Friday February 14th, 2020 to guarantee your space. Calendars with PAD must be submitted by February 14th, 2020. Please refer to 5.3 of the parent handbook.

Parent Signature

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	2	3	4	5	6
PM					
AM	9	10	11	12	13
PM					
AM	Spring Break 16	Spring Break 17	Spring Break 18	Spring Break 19	Spring Break 20
PM					
AM	Spring Break 23	Spring Break 24	Spring Break 25	Spring Break 26	Spring Break 27
PM					
AM	30	31			
PM					

STAFF USE ONLY

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

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

Parent Portion Amount \$ _____ Date Billed: _____

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

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

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

Staff Initials