

# November 2023



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

<p style="text-align: center;"><b>AM &amp; PM</b></p> <p>_____ x \$23.50/day = \$ _____</p> <p style="text-align: center;"><b>Fee Reduction</b></p> <p>_____ x -\$5.75/day = -\$ _____</p>	<p style="text-align: center;"><b>AM Only</b></p> <p>_____ x \$12.75/day = \$ _____</p> <p style="text-align: center;"><b>Fee Reduction</b></p> <p>_____ x -\$2.88/day = -\$ _____</p>
<p style="text-align: center;"><b>Pro-D Day</b></p> <p>_____ x \$36.50/day = \$ _____</p> <p style="text-align: center;"><b>Fee Reduction</b></p> <p>_____ x -\$5.75/day = -\$ _____</p>	<p style="text-align: center;"><b>PM Only</b></p> <p>_____ x \$16.00/day = \$ _____</p> <p style="text-align: center;"><b>Fee Reduction</b></p> <p>_____ x -\$2.88/day = -\$ _____</p>

TOTAL = \$ \_\_\_\_\_

**All calendars must be emailed to your centre no later than Friday October 13th, 2023 to guarantee your space.** All days booked are paid for in advance and are non-refundable, non-negotiable or credited. Please refer to section 5.3 of the parent handbook for further details on the fee payment policy.  
 \*CCFRI Fee Discount is up to a maximum of 20 days per month of care. (Discount subject to change based on government regulations)

\_\_\_\_\_  
 Parent Signature

**Email all calendars directly to your center (no paper copies will be accepted)**

	Monday	Tuesday	Wednesday	Thursday	Friday
AM			1	2	3
PM					
AM	6	7	8	9	*Pro-D Day* 10
PM					
AM	**CLOSED** 13	14	15	16	17
PM	Remembrance Day <i>(in lieu)</i>				
AM	20	21	22	23	24
PM					
AM	27	28	29	30	
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