

January 2024



Child's Name: _____ Centre: _____

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

TOTAL = \$ _____

All calendars must be emailed to your centre no later than November 9th, 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.

Parent Signature

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

	Monday	Tuesday	Wednesday	Thursday	Friday
AM		Winter Break	Winter Break	Winter Break	Winter Break
PM		2	3	4	5
AM	8	9	10	11	12
PM					
AM	15	16	17	18	19
PM					
AM	22	23	24	25	26
PM					
AM	29	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