

November 2008

EXTENDED DAY SIGN-UP

CHILD'S NAME _____ School _____

Will participate in Extended Day Program _____ days per week.

Please select three (3) activities. We will try to honor your first choice activity wherever possible.

MONDAY AND WEDNESDAY

1st choice _____

2nd choice _____

3rd choice _____

TUESDAY AND THURSDAY

1st choice _____

2nd choice _____

3rd choice _____

This form will serve as a commitment to have your child participate in the program. The hours of the program are from 3:15 - 4:45 p.m. All transportation and carpooling arrangements are the responsibility of the parents. I understand that this is a voluntary program, and the program is above and beyond the regular tuition for the school year. I understand that individual absences from a lesson do not merit a partial or full refund of the program fee.

Parent's Signature

Please return your sign up form and payment by November 24th 2008

Check Amt _____