



Saint Joseph School
once a saint, always a saint

Extended Day Use Form 2017-2018

Mother's Work # _____ (Cell) _____

Father's Work # _____ (Cell) _____

Home Email Address: _____

Daytime Email Address: _____ mother _____ news/info also

Daytime Email Address: _____ father _____ news/info also

Daytime email to be reached during the day in case of emergency announcements. Home email used for periodic news and information. If you wish for multiple emails to receive news/information please indicate that above.

Family Name _____

1. Child's Name _____ Grade _____

2. Child's Name _____ Grade _____

3. Child's Name _____ Grade _____

4. Child's Name _____ Grade _____

Please indicate the days you will be attending Extended Day. The school's Finance Office will determine the monthly payment due. A copy of this contract will be returned to you for your records.

	<u>Before School</u>	<u>After School</u>
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____

If only needing DROP IN AS NEEDED INITIAL HERE _____

Office Use Only:

TOTAL NUMBER OF DAYS PER WEEK (Before Care) _____

TOTAL NUMBER OF DAYS PER WEEK (After Care) _____

NUMBER OF CHILDREN ENROLLED _____

MONTHLY PAYMENT DUE: _____