2009 - 2010
Our Lady of Sorrows After School Program
Attendance Schedule

Schedule for: _____
(Month)

1st Child's Name _____ _____ **Grade** _____
Last First

2nd Child's Name _____ _____ **Grade** _____
Last First

3rd Child's Name _____ _____ **Grade** _____
Last First

- This schedule must be completed and submitted with the following month's payment by the 20th of the previous month. It can be sent to the OLS main office or dropped off at the after school program.
- Calendars and payments received after the 20th of the month will be charged a $25 late fee.
- If you have more than one child in the program, and they will be attending on the same day/s and time/s, you can submit one form. However, if they are attending different days/times, please complete one form for each child.

Program Times and Options

Please circle the days and times your child will need care.

FULL DAY 2:30-5:30pm

# of Days	*Days of Week*	**1ST /2ND Child** *Monthly Fee*	**3RD Plus Child** *Monthly Fee*
5 Days	M T W R F	$175	$90
4 Days	M T W R F	$150	$80
3 Days	M T W R F	$120	$65
2 Days	M T W R F	$85	$45

PARTIAL DAY 2:30-4:30pm

# of Days	*Days of Week*	*Monthly Fee*	*Monthly Fee*
5 Days	M T W R F	$120	$65
4 Days	M T W R F	$105	$55
3 Days	M T W R F	$85	$45
2 Days	M T W R F	$60	$35