

August 2022 Extended Day Sign-up Sheet

submit form to mcarter@brightmoorcc.org by August 10; payment due August 15

Student name _____ Primary contact name _____
 (one form per student please) phone number _____

please click the checkbox for each type of care needed in each day:

MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY	
1		2		3		4		5	
8		9		10		11		12	
15		16		17		18		19	
22	AM care 6:30a-7:30a	23	AM care 6:30a-7:30a	24	AM care 6:30a-7:30a	25	AM care 6:30a-7:30a	26	AM care 6:30a-7:30a
			PM care 3:00p-6:00p		PM care 3:15p-6:00p		PM care 3:15p-6:00p		PM care 3:15p-6:00p
29	AM care 6:30a-7:30a PM care 3:15p-6:00p	30	AM care 6:30a-7:30a PM care 3:00p-6:00p	31	AM care 6:30a-7:30a PM care 3:15p-6:00p				

AM care days checked: _____ X \$5.00 \$ _____
 PM care days checked: _____ X \$15.00 \$ _____ *

forms submitted after Aug. 10 will be subject to \$10.00 late fee
accounts paid after Aug. 15 will be subject to \$25.00 late fee

TOTAL DUE: \$ _____