

April 2023 Extended Day Sign-up Sheet

submit form to mcarter@brightmoorcc.org by March 10; payment due March 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	
3	AM care 6:30a-7:30a	4	AM care 6:30a-7:30a	5	AM care 6:30a-7:30a	6	AM care 6:30a-7:30a	7	NO
	PM care 3:00p-6:00p		PM care 3:00p-6:00p		PM care 3:00p-6:00p		PM care 3:00p-6:00p		SCHOOL
10		11		12		13		14	
***** NO SCHOOL *****									
17	AM care 6:30a-7:30a	18	AM care 6:30a-7:30a	19	AM care 6:30a-7:30a	20	AM care 6:30a-7:30a	21	AM care 6:30a-7:30a
	PM care 3:00p-6:00p		PM care 3:00p-6:00p		PM care 3:00p-6:00p		PM care 3:00p-6:00p		PM care 3:00p-6:00p
24	AM care 6:30a-7:30a	25	AM care 6:30a-7:30a	26	AM care 6:30a-7:30a	27	AM care 6:30a-7:30a	28	NO
	PM care 3:00p-6:00p		PM care 3:00p-6:00p		PM care 3:00p-6:00p		PM care 3:00p-6:00p		SCHOOL

AM care days checked: _____ X \$5.00 \$ _____

PM care days checked: _____ X \$15.00 \$ _____

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

TOTAL DUE: \$ _____