

NOV. 2010

Bethany Lutheran School Extended Day-Care Monthly Order Form

Parent's Name: _____

First

Last

Parents' daytime phone numbers: (Mother) _____ (Father) _____

Children: _____ (Grade) _____ (Grade) _____

First

Last

First

Last

Children: _____ (Grade) _____ (Grade) _____

First

Last

First

Last

Please indicate the care desired for Nov. The costs are based on 16 school days this month. Total the costs and submit this form with your check, payable to BETHANY LUTHERAN EXTENDED CARE, to the Extended Care Office by Oct. 25. This will guarantee care for your child(ren).

There is a 10% (of the total) surcharge for orders received after the 25th. If you work a "compressed" week, or 4/10th's, (or another non-standard schedule) please see the E.D.C. Director. If you have 3 or more children, please see the E.D.C. Director

An occasional use card is available for those who need care only a few times per month. You may purchase 12 hours of care for \$60.00. Replenish as needed (not necessarily monthly). **Drop-in, nonprepaid child care will be billed at the rate of \$6.00 per hour.**

There is a minimum day on Wed., 11/10, & Fri., 11/12. If your child will need care that day from 12-6, please make sure you indicate the hours of care you'll need below. Please add \$4.00 for every hour you request. THANK YOU!

Weekly before-school care:

When will you need childcare?

Grades K-3

- _____ *6:30-8:30 AM -\$128 per child for the month
- _____ *7:00-8:30 AM- \$96 per child for the month
- _____ *7:30-8:30 AM -\$64 per child for the month
- _____ *8:00-8:30 AM -\$32 per child for the month

Grades 4-8

- _____ *6:30-8:00AM-\$96 per child for the month
- _____ *7:00-8:00 AM -\$64 per child for the month
- _____ *7:30-8:00 AM-\$32 per child for the month
- _____ *8:00-8:30 AM Wed. mornings-\$6.00

Weekly after-school care:

When will you need childcare?

- _____ *3:30-6:00 PM-\$140.00 per child for the month.
- _____ *3:30-5:30 PM -\$112.00 per child for the month.
- _____ *3:30-5:00 PM -\$84.00 per child for the month.
- _____ *3:30-4:30 PM -\$56.00 per child for the month.

I will need childcare on Wed., 11/10 from 12-_____.

I will need childcare on Fri., 11/12 from 12-_____.

I've added \$4.00 per hour.

Nov. 22-Nov. 24- \$90.00, OR \$40.00 per day _____.

Study Hall Deductions:

x\$3.00(3-8 grade) 10 days

Extra-Curricular Activities Deductions

This includes music, dance, bell choirs, sports, etc.

Deduct \$15 per K-4 and \$20 per 5-8.

Total # of K-4 _____ X \$15 = _____

Total # of 5-8 _____ X \$20 = _____

**or any portion thereof*

Worksheet

Before school care _____

Wed. AM care _____

After school care _____

11/10 & 11/12 _____

11/22-11/24 _____

Occasional Use Card _____

10% Surcharge for _____

Late Order _____

Subtotal of Above: _____

Deductions for Extra-

Curricular Activities _____

Deductions for

Study Hall _____

Total: _____