

St. Albans Country Day School  
**2015-2016 EXTENDED DAY CARE**  
**ENROLLMENT FORM**

for  
Students Who Use Day Care On A Regular Basis

My child, \_\_\_\_\_, Grade \_\_\_\_\_,  
(please print)  
(and) \_\_\_\_\_, \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_,  
\_\_\_\_\_

will be enrolled in St. Albans Extended Day Care Program during the 2015-2016 school year.

Rate: Hourly Basis \$5.50 per hour  
Additional Child \$5.25 per hour

My child will participate in the program as indicated below.

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My family will use the Extended Day Care Program according to the following schedule:

Monday Hours: \_\_\_\_\_  
Tuesday Hours: \_\_\_\_\_  
Wednesday Hours: \_\_\_\_\_  
Thursday Hours: \_\_\_\_\_  
Friday Hours: \_\_\_\_\_

**Please indicate the ratings of movies that are acceptable for your child to view:**

**G** \_\_\_\_\_ **PG** \_\_\_\_\_ **PG13** \_\_\_\_\_ (Grades 6-8 only)

Additional information regarding your schedule:

\_\_\_\_\_  
\_\_\_\_\_

Signature of Parent \_\_\_\_\_