

Bookends Scheduling Sheet

St. Gregory the Great Parish School

Bookends Program

Alice Erlandson, Director

327-3173

Family Name _____

Please circle the sessions you expect your child/ren will attend.

| MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|---|---|---|---|---|
| Date: _____ a.m. \$6 p.m. one hour \$6.50 OR p.m. over an hour \$10 | Date: _____ a.m. \$6 p.m. one hour \$6.50 OR p.m. over an hour \$10 | Date: _____ a.m. \$6 p.m. one hour \$6.50 OR p.m. over an hour \$10 | Date: _____ a.m. \$6 p.m. one hour \$6.50 OR p.m. over an hour \$10 | Date: _____ a.m. \$6 p.m. one hour \$6.50 OR p.m. over an hour \$10 |
| Date: _____ a.m. \$6 p.m. one hour \$6.50 OR p.m. over an hour \$10 | Date: _____ a.m. \$6 p.m. one hour \$6.50 OR p.m. over an hour \$10 | Date: _____ a.m. \$6 p.m. one hour \$6.50 OR p.m. over an hour \$10 | Date: _____ a.m. \$6 p.m. one hour \$6.50 OR p.m. over an hour \$10 | Date: _____ a.m. \$6 p.m. one hour \$6.50 OR p.m. over an hour \$10 |
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Number of a.m. shifts circled X # of children: _____ x _____ = _____ x \$ 6.00 = \$ _____

Number of one hour p.m. shifts circled X # of children: _____ x _____ = _____ x \$ 6.50 = \$ _____

Number of over one hour p.m. shifts circled X # of children: _____ x _____ = _____ x \$10.00 = \$ _____

Total of three shifts \$ _____*

Notes or special instructions: _____

* You will not be charged for shifts you sign up for but do not attend. Money will be rolled forward. If you have underpaid, you will be asked for the remainder at pickup and must prepay for any future services.

FOR OFFICE USE ONLY

Payment type: _____ Electronic _____ Check (# _____) _____ Cash Date Received _____