

March 2016

Due: February 15th With Payment

After School Sign Up Calendar

Name of Child/School Location _____

** Please circle in the box for each day your child will be attending the Kids Inc. After School Program. Please fill out one sheet for each child participating in the program. Payment must be turned in with this calendar.

Monday	Tuesday	Wednesday	Thursday	Friday
	1 st School- 6pm	2 nd School- 6pm	3 rd No Program (Early Release)	4 th No Program (No School)
7 th School- 6pm	8 th School- 6pm	9 th School- 6pm	10 th School- 6pm	11 th School- 6pm
14 th School- 6pm	15 th School- 6pm	16 th School- 6pm	17 th School- 6pm	18 th School- 6pm
21 st No Program Spring Break.....	22 nd No Program	23 rd No Program	24 th No Program	25 th No Program
28 th School- 6pm	29 th School- 6pm	30 th School- 6pm	31 st School- 6pm	

- Checks can be made out to the City of Whitewater.
- If you would like to keep your credit card on file, please contact Michelle Dujardin at 262-473-0121 or mdujardin@whitewater-wi.gov

After School the Entire Month = \$112.00

- If you attend everyday of the month, you receive a discounted rate of \$7 per day.

After School \$8.00 X ____ days = _____

- Please use this box if you are not attending everyday of the month.

Those with Credit Cards on File

I authorize the City of Whitewater to charge the credit card I have on file in the amount of _____