

October 2017

Due: No Later Than Sept 15th

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
2 nd School- 6pm	3 rd School- 6pm	4 th School- 6pm	5 th School- 6pm	6 th School- 6pm
9 th School- 6pm	10 th School- 6pm	11 th School- 6pm	12 th School- 6pm	13 th School- 6pm
16 th School- 6pm	17 th School- 6pm	18 th School- 6pm	19 th School- 6pm	20 th School- 6pm
23 rd School- 6pm	24 th School- 6pm	25 th School- 6pm	26 th School- 6pm	27 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 = \$165.00

- If you attend everyday of the month, you receive a discounted rate of \$7.50 per day.

After School \$8.50 X ____ days = ____

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