

**Panther Place Child Care Program
NELLIE F. BENNETT SCHOOL**

CHILD'S NAME: _____ GRADE: _____

TEACHER: _____

APRIL 2019 ~ PM Schedule

**All Schedules MUST be returned by
March 15, 2019**

\$30.00 Late Fee must be included with all schedules submitted past the date due

Only 1 Schedule Per child

Please call the Childcare Secretary- 732-701-1900, ext. 5206 with ALL changes.

We require 48 hour advance notice for all schedule changes

Parents **Must** call the daycare office first, then follow up with a note to the teacher for any changes

Payment is due immediately for additional days and times added. We do not bill.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<u>1</u> ___ 4:00 p.m. ___ 5:00 p.m. V TH ___ 6:00 p.m.	<u>2</u> ___ 4:00 p.m. ___ 5:00 p.m. V TH CH ___ 6:00 p.m.	<u>3</u> ___ 4:00 p.m. ___ 5:00 p.m. V TH ___ 6:00 p.m.	<u>4</u> ___ 4:00 p.m. ___ 5:00 p.m. V TH CH ___ 6:00 p.m.	<u>5</u> ___ 4:00 p.m. ___ 5:00 p.m. ___ 6:00 p.m.
<u>8</u> ___ 4:00 p.m. ___ 5:00 p.m. V TH ___ 6:00 p.m.	<u>9</u> ___ 4:00 p.m. ___ 5:00 p.m. V TH CH ___ 6:00 p.m.	<u>10</u> ___ 4:00 p.m. ___ 5:00 p.m. V TH ___ 6:00 p.m.	<u>11</u> ___ 4:00 p.m. ___ 5:00 p.m. V TH CH ___ 6:00 p.m.	<u>12</u> ___ 4:00 p.m. ___ 5:00 p.m. ___ 6:00 p.m.
<u>15</u> <u>½ day rates</u> ___ 2:00- \$5.00 ___ 3:00- \$8.00 ___ 4:00- \$11.00 ___ 5:00- \$14.00 ___ 6:00- \$17.00 No Think Tank/Voyager	<u>16</u> <u>½ day rates</u> ___ 2:00- \$5.00 ___ 3:00- \$8.00 ___ 4:00- \$11.00 ___ 5:00- \$14.00 ___ 6:00- \$17.00 No Think Tank/Voyager	<u>17</u> <u>½ day rates</u> ___ 2:00- \$5.00 ___ 3:00- \$8.00 ___ 4:00- \$11.00 ___ 5:00- \$14.00 ___ 6:00- \$17.00 No Think Tank/Voyager	<u>18</u> <u>½ day rates</u> ___ 2:00- \$5.00 ___ 3:00- \$8.00 ___ 4:00- \$11.00 ___ 5:00- \$14.00 ___ 6:00- \$17.00 No Think Tank/Voyager	<u>19</u> <u>SCHOOL CLOSED</u>
<u>22</u>	<u>23</u> <u>SCHOOLS</u>	<u>24</u>	<u>25</u> <u>CLOSED</u>	<u>26</u>
<u>29</u> ___ 4:00 p.m. ___ 5:00 p.m. V TH ___ 6:00 p.m.	<u>30</u> ___ 4:00 p.m. ___ 5:00 p.m. V TH CH ___ 6:00 p.m.			

Parents- Please remember to take a picture or copy of your child's schedule

1. Days enrolled in Regular P.M. Day Care Program :# _____ x \$ 7.00= \$ _____ 4:00 pm
 # _____ x \$ 10.00= \$ _____ 5:00 pm
 # _____ x \$ 13.00= \$ _____ 6:00 pm

2. Days enrolled in ½ day sessions: # _____ x \$ _____ = \$ _____

***ANY PM HALF DAYS NEEDED MUST BE PRE-BOOKED NOW* (We do not add the ½ day week)**

3. Total Days Attending: # _____

4. Chorus, Voyager & Think Tank - \$5.00 per day discount
 (indicate which days above) # _____ x \$ 5.00 = \$ _____
 Less:

Sub Total: (\$ _____)

5. Circle discount if applicable:
 20% Multiple Child -(only off oldest child) or 25% Reduced Lunch (BOE approved) Less:\$ _____

6. TOTAL AMOUNT REMITTED: \$ _____

Please postdate your check for APRIL 4, 2019 and make payable to PPBOE Checks not postdated will be deposited immediately as per BOE Policy

Schedules MUST be submitted with the total payment due by all parties