

P.S. 185 After School Program 2021-22

Student Information

Name: _____ Class: _____

To enroll your child in our After School Program, please indicate the days and hours you require.

June 2022				
Mon	Tue	Wed	Thu	Fri
		1	2	3 NO AFTER SCHOOL
6	7 NO AFTER SCHOOL	8	9 NO AFTER SCHOOL	1
13	14	15	16	17
20 NO SCHOOL	21	22	23	24
27	30			17 TOTAL DAYS

There are 3 pick-up rates: by 3:00 pm (\$6); by 4:00 pm (\$18); by 5:00 pm (\$30)

No. of days _____	X	Rate (\$6, \$18 or \$30) \$ _____	=	Total amount due \$ _____
-----------------------------	----------	---	----------	-------------------------------------

Payment is due in advance - return this page with check payable to **PS 185**. Thank you.

Parent Signature: _____ Date: _____