

February

St. ROBERT BELLARMINE

(PLEASE CHECK ONE PAYMENT OPTION)

_____ CHECK _____ CASH _____ FACTS ONLINE

AM 1 CHILD \$5.00

2+ CHILD \$4.00

PM 1 CHILD \$12.00

2+ CHILD \$11.00

AMOUNT DUE \$ _____

FAMILY NAME _____

EMERGENCY CONTACT TELEPHONE _____

2023

STUDENT NAME(S) _____

EXTENDED DAY PROGRAM

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1 2:00 PM Dismissal Circle any that apply AM PM	2 Circle any that apply AM PM	3 Circle any that apply AM PM	4
5	6 Circle any that apply AM PM	7 Circle any that apply AM PM	8 Circle any that apply AM PM	9 Circle any that apply AM PM	10 Circle any that apply AM PM	11
12	13 Circle any that apply AM PM	14 Circle any that apply AM PM	15 Circle any that apply AM PM	16 Circle any that apply AM PM	17 NO SCHOOL	18
19	20 NO SCHOOL	21 Circle any that apply AM PM	22 Circle any that apply AM PM	23 Circle any that apply AM PM	24 Circle any that apply AM PM	25
26	27 Circle any that apply AM PM	28 Circle any that apply AM PM				