

# June

St. ROBERT BELLARMINI

(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	3
				Circle any that apply	Circle any that apply	
				AM                  PM	AM                  PM	
4	5	6	7	8	9	10
	Circle any that apply	Circle any that apply	Circle any that apply	<b>LAST DAY OF SCHOOL</b>		
	AM                  PM	AM                  PM	AM                  PM	<b>MORNING EDP ONLY</b>		
				AM		
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	