



Extended Day Registration Form

2009-10 School Year

Grade Pre-K – 6 (Lower School Campus)

Yes, we would like to enroll our child in Extended Day for ____ day(s) per week. Please bill us monthly for the tuition.

Staff Student

Personal Information

Child's Name: _____ PCA Grade: _____
 Parent's Name: _____ Sex (Circle One): Male/Female
 Home Phone: _____ Work Phone: _____
 Cell Phone/Pager: _____ E-mail: _____

Extended Day Information

Please Enroll in Program (check one)

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MONTHLY TUITION SCHEDULE Preschool through Kindergarten

Program	1 Day Per Week	2 Days Per Week	3 Days Per Week	4 Days Per Week	5 Days Per Week
Early Afternoon 2:30-3:15	\$11	\$22	\$32	\$43	\$54
Early Afternoon Until 4:30	\$22	\$44	\$65	\$86	\$108
Late Afternoon Until 6:00	\$42	\$84	\$126	\$168	\$210
Unscheduled Daily Rate	\$19 per day				

Please Enroll in Program (check one)

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MONTHLY TUITION SCHEDULE Grades 1-6

Program	1 Day Per Week	2 Days Per Week	3 Days Per Week	4 Days Per Week	5 Days Per Week
Early Afternoon Until 4:30	\$20	\$39	\$59	\$79	\$98
Late Afternoon Until 6:00	\$38	\$76	\$114	\$152	\$190
Unscheduled Daily Rate	\$17 per day				

LATE PICK-UP FEE: Parents will be charged a dollar per minute, per child, after 6:00 p.m.

Any known allergies: _____

There will be no Extended Day on any days when school is not in session including inclement weather days. Additionally, all students who are not picked up from carpool within the specified time-frame will automatically be sent to Extended Day where the Unscheduled Daily Rate will apply. I(We) understand that my child must be signed out of Extended Day by a parent or one of the following persons authorized by me (us):

I (We) understand that I (we) will be responsible for Extended Day tuition at the time of billing or my (our) child will not be allowed to attend Extended Day the following month. I (We) understand there are no refunds for missed days or pick-up times earlier than scheduled. Adherence to pick-up time is appreciated. However, in the event actual pick up time exceeds chosen plan, actual excess time (or days) will be calculated and the amount charged will be based on the plan that most closely applies.

 Parent's Signature

 Date

Mail this completed form to Prestonwood Christian Academy, Attn: Brenda Burkes or give it to the Lower School receptionist by **Monday, Aug. 18, 2008** in order to guarantee your child's spot in Extended Day. Any students registered after this date will not be able to begin utilizing Extended Day until **Monday, Aug. 5, 2008**. Please call Brenda Burkes at 214-773-5206 with any questions.

Prestonwood Christian Academy
 Attn: Lower School Extended Day/Brenda Burkes
 6801 W. Park Blvd., Plano, Texas, 75093

Please note: If you need to change your extended care plan at any time during the school year, please notify the director by e-mail (bburkes@prestonwoodchristian.org) or in writing. Otherwise, you will continue to be charged at the original rate.