

Child's Name(s)

Parent/Guardian Name

School

November 2017

Please fill out the scheduling calendar and return to your director. Payments are due at time of scheduling! Discounts are not applied to drop-ins. You must submit your schedule by Friday at 6pm for services needed the following week. Thanks!



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3	4
			<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	
5	6	7	8	9	10	11
	<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	
12	13	14	15	16	17	18
	<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	
19	20	21	22	23	24	25
	Full Day @ SOAR	Full Day @ SOAR	CLOSED	CLOSED	CLOSED	
26	27	28	29	30		
	<input type="checkbox"/> AM care	<input type="checkbox"/> AM care	AM care	<input type="checkbox"/> AM care		