## Episcopal Day School of Evergreen 2024-2025 School Year EXTENDED CARE MONTHLY CONTRACT

Child's Name	Birthdate
Parent/Guardian	
	Work Phone
Parent/Guardian	
Home/Cell Phone	Work Phone
Email	
PLEASE CHO	DOSE THE EXTENDED CARE PLAN FOR YOUR CHILD:
Before Care ONLY	After Care ONLY Both Before & After Care
Day(s) of Service:	Monday / Tuesday / Wednesday / Thursday / Friday
Special Needs/Instruc	tions:
EXTENDED CARE FEES	<u>.                                    </u>
Before & After Care: \$30.00 per day with contract (7:45 AM - 5:30 PM, no partial rates)	
Before Care Only: \$15.00 per day with contract (7:45 AM - 9:00 AM, no partial rates)	
After Care Only: \$25 pe	er day with contract (3:00 PM - 5:30 PM, no partial rates)
· ·	able) with a contract: same pricing; 48 hr notice & approval required
Drop-ins (if available) w	vithout a contract: \$30 per day for any portion of extended care; 48 hr
notice & approval require	
There is	a 50% sibling discount regardless of which plan you choose.
Ex	tended Care fees will be added to your tuition statement.
	edule (adding or changing days) requires approval. All changes to your schedule, requires <b>2 weeks' notice</b> to EDSE and may be subject to a processing fee.
Signature	Date