

Parents, please sign this agreement if you are participating in Early or Extended Care. Please return this form to the Preschool office. Thank you

**Extended Care Agreement**  
**Open to all ages**

7:30 AM - 6:00 PM  
\$10.00 morning only  
\$20.00 pickup by 3:30 pm \$25 for Toddler and Two's  
\$30.00 pickup by 6:00 pm \$35 for Toddler and Two's  
\$15.00 4:00 - 6:00 pm

If you find that you would like to lock into an early or extended day **full** day schedule, your family will receive a 7% discount on early and extended care portion of the tuition.

Place: Classroom 209/205

I wish to enroll my child, \_\_\_\_\_ in the extended care program at Winfree Memorial Preschool for the 2017-2018 school year. My child will attend extended care on the following day(s)

\_\_\_\_\_. I am enclosing the first week's fee in the amount of \_\_\_\_\_ to hold my child's placement. I acknowledge responsibility for extended care payments during the school year. Extended care tuition is due by the end of the week of services rendered. **I will be responsible; however, for any days my child is absent. I realize that I may withdraw my child from extended care if I give a one week notice.** My child is registered in the \_\_\_\_\_ class.

I understand that the Extended Care Program will begin on September 5<sup>th</sup> 2017 and will continue until the last Friday in May, 2018. **I further understand that extended care will not be offered on days Winfree Preschool is closed. Also on delayed Chesterfield openings, we will not offer early morning care.** Afternoon care will be available 12:30–6:00 pm.

The following people are authorized to pick up my child from the extended care program:

Name:	Relationship:	Phone #:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature:	Date:
_____	_____