

Once Upon A Time Preschool

2018 Summer Session

Child's Name _____

Age _____

Sessions run from: 8:30 - 11:30 (MORNING)

12:30 - 3:30 (AFTERNOON)

8:30 - 3:30 (ALL DAY)

Check your choices below:

Week 1 – July 9 – 12			
<p style="text-align: center;">Monday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>	<p style="text-align: center;">Tuesday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>	<p style="text-align: center;">Wednesday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>	<p style="text-align: center;">Thursday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>
<input type="checkbox"/> Full week (M-Th 8:30am-3:30pm) discount \$140			
Office Use Only:	Balance: _____ Check #: _____ Date: ____/____/____		

Week 2 – July 16 – 19			
<p style="text-align: center;">Monday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>	<p style="text-align: center;">Tuesday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>	<p style="text-align: center;">Wednesday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>	<p style="text-align: center;">Thursday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>
<input type="checkbox"/> Full week (M-Th 8:30am-3:30pm) discount \$140			
Office Use Only:	Balance: _____ Check #: _____ Date: ____/____/____		

Week 3 – July 23 – 26			
<p style="text-align: center;">Monday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>	<p style="text-align: center;">Tuesday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>	<p style="text-align: center;">Wednesday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>	<p style="text-align: center;">Thursday</p> <p><input type="checkbox"/> Morning \$20</p> <p><input type="checkbox"/> Afternoon \$20</p> <p><input type="checkbox"/> All day \$40</p>
<input type="checkbox"/> Full week (M-Th 8:30am-3:30pm) discount \$140			
Office Use Only:	Balance: _____ Check #: _____ Date: ____/____/____		

Week 4 – July 30 – August 2

Monday	Tuesday	Wednesday	Thursday
<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20
<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20
<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40
<input type="checkbox"/> Full week (M-Th 8:30am-3:30pm) discount \$140			
Office Use Only:	Balance: _____ Check #: _____ Date: ____/____/____		

Week 5 – August 6 - 9

Monday	Tuesday	Wednesday	Thursday
<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20
<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20
<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40
<input type="checkbox"/> Full week (M-Th 8:30am-3:30pm) discount \$140			
Office Use Only:	Balance: _____ Check #: _____ Date: ____/____/____		

Week 6 – August 13 - 16

Monday	Tuesday	Wednesday	Thursday
<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20
<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20
<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40
<input type="checkbox"/> Full week (M-Th 8:30am-3:30pm) discount \$140			
Office Use Only:	Balance: _____ Check #: _____ Date: ____/____/____		

Week 7 – August 20 - 23

Monday	Tuesday	Wednesday	Thursday
<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20	<input type="checkbox"/> Morning \$20
<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20	<input type="checkbox"/> Afternoon \$20
<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40	<input type="checkbox"/> All day \$40
<input type="checkbox"/> Full week (M-Th 8:30am-3:30pm) discount \$140			
Office Use Only:	Balance: _____ Check #: _____ Date: ____/____/____		