



Summer Program Enrollment Form – 2010

For Current and Incoming Bixby Students

Child's Name <i>Please complete form PER child.</i>	Child's 2010-11 Grade Level	Child's Birthdate
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Parent/Guardian Information

*****IMPORTANT*****

Please report to the office any changes to your address, phone numbers, email, health provider, medical information, and persons authorized to pick up your child.

Regular Child Care Registration (monthly rate)**

If your child will attend every day of a month, place total(s) below.
Refer to the '09-'10 school year tuition reference sheet.

June	July	August
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Regular Child Care Registration (daily rate)**

Place an "X" to mark each day your child will attend, then calculate totals.

Elementary: \$72 Preschool (full day): \$65 Preschool (9:00-2:30) = \$55

JUNE					
Monday	Tuesday	Wednesday	Thursday	Friday	
	1	2	3	4	# of days _____
7	8	9	10	11	X daily rate \$ _____
14	15	16	17	18	Sibling discount (15%) \$ _____
21	22	23	24	25	June Total \$ _____
28	29	30			

JULY					
Monday	Tuesday	Wednesday	Thursday	Friday	
			1	2	# of days _____
5 SCHOOL CLOSED	6	7	8	9	X daily rate \$ _____
12	13	14	15	16	Sibling discount (15%) \$ _____
19	20	21	22	23	July Total \$ _____
26	27	28	29	30	

AUGUST					
Monday	Tuesday	Wednesday	Thursday	Friday	
2	3	4	5	6	# of days _____
9	10	11	12	13	X daily rate \$ _____
16	17	18	19	20 Closed for Inservice day	Sibling discount (15%) \$ _____
23	24	25	26	27	Aug Total \$ _____

**NOTE: If the monthly and/or daily rates do not meet your needs, please speak with Pat, Cindy, Elizabeth, Kim, or Jack.

Payments are due by the 5th of each month.

