

**RIM OF THE WORLD RECREATION AND PARK DISTRICT  
REQUEST FOR CHILDCARE SERVICES  
2008 - 2009  
SCHOOL-AGED CHILDCARE**

(Please print)

PARENT'S NAME \_\_\_\_\_ CHILDCARE SITE \_\_\_\_\_

P.O. BOX \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PHYSICAL ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ HOME PHONE \_\_\_\_\_

MOM'S WORK \_\_\_\_\_ MOM'S CELL \_\_\_\_\_

DAD'S WORK \_\_\_\_\_ DAD'S CELL \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ @ \_\_\_\_\_

**This schedule will remain in effect throughout the 2008-2009 school year, unless revised by you.**

**THE CHILDCARE COORDINATOR MUST CLEAR SCHEDULE CHANGES. CHANGES MADE AFTER THE 15<sup>TH</sup> OF THE MONTH MAY NOT BE REFLECTED ON YOUR NEXT MONTHLY STATEMENT.**

Billings throughout the school year will be based upon this schedule. You will be asked to notify the Park District of your plans for non-school days for the purpose of determining staffing needs. Please give an indication, on this form, of what you expect to be your tentative schedule of care on non-school days.

Effective \_\_\_\_\_, my child(ren) will need childcare the following days and times:

1<sup>st</sup> Child's Name \_\_\_\_\_

2<sup>nd</sup> Child's Name \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_

\_\_\_ **BEFORE SCHOOL CARE**  
**from** \_\_\_\_\_ a.m. on Mon.  
 \_\_\_\_\_ a.m. on Tues.  
 \_\_\_\_\_ a.m. on Wed.  
 \_\_\_\_\_ a.m. on Thurs.  
 \_\_\_\_\_ a.m. on Fri.

\_\_\_ **BEFORE SCHOOL CARE**  
**from** \_\_\_\_\_ a.m. on Mon.  
 \_\_\_\_\_ a.m. on Tues.  
 \_\_\_\_\_ a.m. on Wed.  
 \_\_\_\_\_ a.m. on Thurs.  
 \_\_\_\_\_ a.m. on Fri.

\_\_\_ **AFTER SCHOOL CARE**  
**until** \_\_\_\_\_ p.m. on Mon.  
 \_\_\_\_\_ p.m. on Tues.  
 \_\_\_\_\_ p.m. on Wed.  
 \_\_\_\_\_ p.m. on Thurs.  
 \_\_\_\_\_ p.m. on Fri.

\_\_\_ **AFTER SCHOOL CARE**  
**until** \_\_\_\_\_ p.m. on Mon.  
 \_\_\_\_\_ p.m. on Tues.  
 \_\_\_\_\_ p.m. on Wed.  
 \_\_\_\_\_ p.m. on Thurs.  
 \_\_\_\_\_ p.m. on Fri.

\_\_\_ **NON-SCHOOL DAYS**  
 from \_\_\_\_\_ to \_\_\_\_\_ on Mon.  
 from \_\_\_\_\_ to \_\_\_\_\_ on Tues.  
 from \_\_\_\_\_ to \_\_\_\_\_ on Wed.  
 from \_\_\_\_\_ to \_\_\_\_\_ on Thurs.  
 from \_\_\_\_\_ to \_\_\_\_\_ on Fri.

\_\_\_ **NON-SCHOOL DAYS**  
 from \_\_\_\_\_ to \_\_\_\_\_ on Mon.  
 from \_\_\_\_\_ to \_\_\_\_\_ on Tues.  
 from \_\_\_\_\_ to \_\_\_\_\_ on Wed.  
 from \_\_\_\_\_ to \_\_\_\_\_ on Thurs.  
 from \_\_\_\_\_ to \_\_\_\_\_ on Fri.

\_\_\_ **NO CARE ON NON-SCHOOL DAYS**

\_\_\_ **NO CARE ON NON-SCHOOL DAY**

**I UNDERSTAND THAT, UNLESS CLEARED IN ADVANCE BY THE CHILDCARE STAFF, HOURS OF CARE OTHER THAN THOSE SCHEDULED ABOVE WILL BE BILLED AT \$5.00 PER HOUR, WITH A THREE-HOUR MINIMUM.**

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_