



**2023-2024 BEFORE and AFTER CARE
PS/PK through Grade Six**

PRESCHOOL / PRE KINDERGARTEN

6:30 to 8:00 AM BeforeCare

South Entrance Doors open at 7:50am for normal drop-off.

3:00 to 5:30 PM AfterCare

If student is enrolled in one of our all day programs, these fees are already included.

KINDERGARTEN – GRADE SIX

6:30 to 7:30 AM BeforeCare

Farrell Hall Doors open at 6:30am for BeforeCare.

\$2.00 per student, per day* (includes Breakfast)

AFTERCARE RATES (Dismissal Time to 5:30 PM)

We will notify you when Childcare will be offered on days when we are not in session.

Number of Days	1 Child	2 Children	3 Children	4 or More Children
1 Day	\$12.00	\$24.00	\$33.00	No Additional Fee
2 Days	\$24.00	\$48.00	\$55.00	No Additional Fee
3 Days	\$36.00	\$72.00	\$80.00	No Additional Fee
4 Days	\$48.00	\$96.00	\$95.00	No Additional Fee
5 Days	\$60.00	\$120.00	\$125.00	No Additional Fee

HALF DAY AND FULL DAY CHILDCARE

We will be offering childcare for students in grades K-6 on days school dismisses at 11:30 a.m. We will also offer full-day childcare on select days when we are not in session. Cafeteria lunches will be available on Half Day Dismissals. An afternoon snack will be provided.

HALF DAY

1 Child	2 Children	3 Children	4 or More Children
\$40.00	\$60.00	\$70.00	No Additional Fee

FULL DAY

1 Child	2 Children	3 Children	4 or More Children
\$65.00	\$95.00	\$115.00	No Additional Fee

ALL AFTERCARE PROGRAMS

Students must be picked up and signed out by an adult no later than 5:30 p.m. Any student picked up after 5:30 p.m. will be charged a late fee of \$.50 per minute. This applies to Aftercare and Half-Day/Full-Day users. Fees are due every Monday for the previous week.

2023-24 BEFORE / AFTER CARE Registration

Parent Name: _____ Parent SIGNATURE: _____

Cell Phone: _____ Work Phone: _____ Address: _____

Check program(s) needed: Before Care _____ Aftercare _____ Half Day _____ Full Day _____

Child: _____ Grade: _____ Birthdate _____ Child: _____ Grade: _____ Birthdate _____

Child: _____ Grade: _____ Birthdate _____ Child: _____ Grade: _____ Birthdate _____

Emergency Contact: _____ Relationship: _____ Phone: _____

*This program is not licensed or regulated by DCFS.