

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Grade: \_\_\_\_\_

**EXTENDED DAY PROGRAMS**

Please circle program: **Aftercare (dismissal > 4 PM or until 5:30 PM)** **Morning Care < 7 AM > the start of school**

Please record time and days your child will be attending the Extended Day Program. All children attending **must have an Extended Day Program Emergency Form on file before attending the program.** For monthly discount, **payments are due with a calendar by the third of each month, prior** to attending.

The Extended Day Programs phone number is **978-479-4542**, if you have any questions.

**OCTOBER 2018**

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
1	2	3	4	5  No School
8 Columbus Day No School	9	10	11	12
15	16	17	18	19
22	22	23	24	25
29	30	31		