

PARENTS: CIRCLE "YES" ON THE DAY(S) YOUR CHILD WILL ATTEND THE COUGAR CLUB
 ***WHEN YOU PICK-UP YOUR CHILD, PLEASE INITIAL THE DATE AND NOTE THE TIME**

ST. ALPHONSUS COUGAR CLUB ATTENDANCE CALENDAR: NOVEMBER 2023
Calendar Due: WEDNESDAY, OCTOBER 20, 2023

Child's Name: _____ Grade: _____ Room Number: _____

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>
		1 YES TIME OUT: INITIALS	2 YES TIME OUT: INITIALS	3 NO SCHOOL Cougar Club Closed
6 YES TIME OUT: INITIALS:	7 YES TIME OUT: INITIALS:	8 YES TIME OUT: INITIALS:	9 YES TIME OUT: INITIALS:	10 YES TIME OUT: INITIALS:
13 YES TIME OUT: INITIALS:	14 YES TIME OUT: INITIALS:	15 YES TIME OUT: INITIALS:	16 YES TIME OUT: INITIALS:	17 YES TIME OUT: INITIALS:
20 YES TIME OUT: INITIALS:	21 YES TIME OUT: INITIALS:	22 NO SCHOOL Cougar Club Closed	23 NO SCHOOL Cougar Club Closed	24 NO SCHOOL Cougar Club Closed
27 YES TIME OUT: INITIALS:	28 YES TIME OUT: INITIALS:	29 YES TIME OUT: INITIALS:	30 YES TIME OUT: INITIALS:	
OFFICE USE <u>Date Received/Staff:</u>	OFFICE USE <u>4:30 sign out:</u> \$	OFFICE USE <u>6:00 sign out:</u> \$	OFFICE USE <u>Early Release:</u> \$	OFFICE USE <u>TOTAL DUE:</u>

Agreement: I have read and understand the addition and cancellation policies for the 2023-2024 Cougar Club. I understand that the fees charged for daily care will be based on the actual sign out time.

My child is registered _____ After School Care Days.

Parent Signature: _____ Date: _____