



PC ___/___/___
 Initials _____
 MC Primary ___/___/___
 Initials _____
 BO ___/___/___
 Disc ED _____
 Initials _____
 Anytime Plan

Extended Day Registration President's Day Monday, February 17, 2025

REGISTRATION FORM DUE ON OR BEFORE FRIDAY, JANUARY 10th

ANYTIME PLAN: This plan is for students who pay \$270 / \$135 to attend school on ALL days / times CDSA is open.

Child's Name: _____ Class: _____

- Please check the boxes for the days/times your child will need care:

Monday, February 17th:

My child will need **Extended Hours** from 7:00-8:00 am (\$.10/minute)

Yes, my child will attend 8:15AM-3:30PM (\$35)

Yes, my child will attend ½ **Day** 8:15AM-12:30PM (\$25)

My child will need **Extended Hours** from 3:30-6:00PM (\$.10/minute)

▶ Not currently enrolled NON CDSA Students / Alumni from 8:15AM-3:30PM (\$45)

ANYTIME PLAN:

My child is on the Anytime ED Plan and they will will not be attending

If your child is attending extended day, **please** remember to provide a lunch for him/her.

Lunch is not provided.

A pre-registration form must be completed and returned to the Administrative Assistant by the designated deadline stated above. In order to maintain ratios, **no drop-ins** will be allowed. Thank you!

You will be invoiced for any holiday/early dismissal extended day for which you register, whether or not your child actually attends.

 Parent Signature

 Date

*Please telephone the ED cell to speak with staff during Extended Day: **817-253-9994***

Revised: 08-12-2024