

Parent Signature

## DIVINE MERCY CATHOLIC SCHOOL Before/After Care Schedule

Student's Na	me:		Homeroom:	
Student's Name:			Homeroom:	
Student's Na	me:		Homeroom:	
Student's Na	me:		Homeroom:	
ease indicate your antid	cipated schedule for di	rop off (Before Care) an	d/or pick-up (After Care) of your child(	ren)
* Before Care is	from 7:00 am until 7:4!	5 am on all scheduled so	chool days.	
* After Care is fr	om 3:00 pm until 5:30	pm on all scheduled sch	ool days	
Schedule Options	s:			
•	·	likely be using the prog check the Year Round b	ram on the same days throughout the box.	
2. If you will hav	ve a rotating schedule,	you have the option to	fill out this form weekly.	
pick up a form when	າ you drop off/pick-up ງ	our child.		
Day of the Week	Drop Off Time (AM Only )	Pick-up Time (PM Only)	My child/ren will be	
Day of the Week Monday	·	•	My child/ren will be using this schedule	
-	·	•	using this schedule unless otherwise	
Monday	·	•	using this schedule	
Monday Tuesday	·	•	using this schedule unless otherwise	2024-2025

Date