

Heart of the Shepherd Child Development Center Schedule Request Form

Child's Name _____ Date of Birth _____
 Parents' Name(s) _____ Today's Date _____

1st Schedule Choice

Early Care Session 6:30 a.m.-8:00 a.m. Mon. Tues. Wed Thurs Fri
 Morning Session 8:00 a.m.-11:30 a.m. Mon. Tues. Wed Thurs Fri
 Lunch/Rest Session 11:30a.m.-1:30p.m. Mon. Tues. Wed Thurs Fri
 Afternoon Session 1:30 p.m.-5:00 p.m. Mon. Tues. Wed Thurs Fri
 Late Care Session 5:00 p.m.-6:00 p.m. Mon. Tues. Wed Thurs Fri
 Full Day 6:30 a.m. -6:00 p.m. Mon. Tues. Wed Thurs Fri
 Before School Care 6:30a.m.-9:00a.m. Mon. Tues. Wed Thurs Fri
 After School Care 4:00p.m.-6:00p.m. Mon. Tues. Wed Thurs Fri

2nd Schedule Choice

Early Care Session 6:30 a.m.-8:00 a.m. Mon. Tues. Wed Thurs Fri
 Morning Session 8:00 a.m.-11:30 a.m. Mon. Tues. Wed Thurs Fri
 Lunch/Rest Session 11:30a.m.-1:30p.m. Mon. Tues. Wed Thurs Fri
 Afternoon Session 1:30 p.m.-5:00 p.m. Mon. Tues. Wed Thurs Fri
 Late Care Session 5:00 p.m.-6:00 p.m. Mon. Tues. Wed Thurs Fri
 Full Day 6:30 a.m. -6:00 p.m. Mon. Tues. Wed Thurs Fri
 Before School Care 6:30a.m.-9:00a.m. Mon. Tues. Wed Thurs Fri
 After School Care 4:00p.m.-6:00p.m. Mon. Tues. Wed Thurs Fri

Every effort will be made to offer families their first choice of sessions and days. Children will be enrolled in classrooms/programs corresponding to their birth date and age. A \$50.00 registration fee will need to accompany this Schedule Request Form. A \$50.00 registration fee is charged each academic year. Schedule Requests will be granted on a first come/first serve basis and be subject to availability. Parents will be notified of their child's schedule within one month after this form is received. Upon acceptance of the schedule, the Enrollment Contract will need to be signed, returned and accompanied by the corresponding Deposit of 2 weeks tuition.

For Office Use Only: Date Received _____ Check # _____