

CHILD NAME: _____ Parent Initials _____ Date: _____
 Please print clearly and fill in times for in and out. Bus times will be automatically scheduled

MARCH 2018 SCHEDULE

MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY	
IN	OUT	IN	OUT	IN	OUT	IN	OUT	IN	OUT
FEB. 26		FEB. 27		FEB. 28		1		2	
5		6		7		8		9	
12		13		1/2 Day 14		15		16	
19		20		21		22		23	
26		27		28		29		30	
								CLOSED	

HRS/WK: _____

HRS/WK: _____

HRS/WK: _____

HRS/WK: _____

HRS/WK: _____

DUE DATE: THURSDAY, FEBRUARY 22nd.

*Schedule changes due a week in advance. Part time billing will be based on schedule.