

**CITY OF PIEDMONT
DEPARTMENT OF RECREATION
HAVENS SCHOOLMATES
420-3078**

NAME	
GRADE	COLOR OF BUS
NAME OF PARENT & DAYTIME CONTACT NUMBER	
PERSON AUTHORIZED TO PICK UP	

- A 7:30 - 8:00AM
- B 8:00 - 9:00AM
- C 9:00 - 10:00AM
- D 10:00 - 10:50AM
- E 10:50 - 11:40AM
- F 11:40 - 1:00PM
- G 1:00 - 2:10PM
- H 2:10 - 3:10PM
- I 3:10 - 4:00PM
- J 4:00 - 5:00PM
- K 5:00 - 6:00PM

May & June 2010

****All calendars are due within the first five business days of the month. Any calendar turned in after this time will be charged the drop-in rate.****

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
3	4	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28
31 No Program – Memorial Day	June 1	2 <small>Minimum Day 12:05 Dismissal</small>	3	4
7	8	9	10	11
14	15	16	17 <small>Last Day of School 12:05 Dismissal</small>	18 No Program

Check the time blocks needed and the code letters into the appropriate calendar date boxes. Add the number of letters you have placed through the entire calendar. Multiply this number by the rate that applies to you.

# of letters	x \$5.75 RESIDENTS ONLY	= Total	
	x \$7.75 NON RESIDENTS	= Total	
<i>For days where total use is 4 hours or more:</i>			
# of letters	x \$5.50 RESIDENTS ONLY	= Total	OVERALL TOTAL

NO CASH CAN BE ACCEPTED FOR PAYMENT. Please return calendars as soon as possible. Drop-ins are accepted on a space availability basis with 24 hour advance notice at \$7.75 per hour OR PURCHASE AN 18 DROP-CARD at \$7.00 per hour.

Parent's Signature _____

Date _____

CHARGE TO MY <input type="checkbox"/> M/C <input type="checkbox"/> VISA <input type="checkbox"/> AMEX CARD # _____ EXPIRATION DATE: _____ AUTHORIZED SIGNATURE _____	<p>*Card numbers NOT kept on file Please provide credit card number</p>
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**CITY OF PIEDMONT
DEPARTMENT OF RECREATION
BEACH SCHOOLMATES
420-3077**

NAME _____
GRADE _____
NAME OF PARENT & DAYTIME CONTACT NUMBER _____
PERSON AUTHORIZED TO PICK UP _____

- A 7:30 - 8:30AM
- B 8:30 - 9:30AM
- C 9:30 - 11:00AM
- D 11:00 - 11:40AM
- E 11:40 - 1:00PM
- F 1:00 - 1:45PM
- G 1:45 - 2:55PM
- H 2:55 - 4:00PM
- I 4:00 - 5:00PM
- J 5:00 - 6:00PM

May & June 2010

All calendars are due within the first five business days of the month. Any calendar turned in after this time will be charged the drop-in rate.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
3	4	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28
31	June 1	2	3	4
No Program – Memorial Day		Staff Collaboration Minimum Day 12:05 Dismisal	Open House 12:05pm Dismisal	
7	8	9	10	11
14	15	16	17	18
			Last Day of School 12:05 Dismisal	No Program

Check the time blocks needed and the code letters into the appropriate calendar date boxes. Add the number of letters you have placed through the entire calendar. Multiply this number by the rate that applies to you.

# of letters _____	x \$5.75 RESIDENTS ONLY	= Total _____	
	x \$7.75 NON RESIDENTS	= Total _____	
For days where total use is 4 hours or more:			
# of letters _____	x \$5.50 RESIDENTS ONLY	= Total _____	OVERALL TOTAL

NO CASH CAN BE ACCEPTED FOR PAYMENT. Please return calendars as soon as possible. Drop-ins are accepted on a space availability basis with 24 hour advance notice at \$7.75 per hour OR PURCHASE AN 18 DROP-CARD at \$7.00 per hour.

Parent's Signature _____

Date _____

CHARGE TO MY _____ M/C _____ VISA _____ AMEX CARD # _____ EXPIRATION DATE: _____ AUTHORIZED SIGNATURE _____	<p>*Card numbers NOT kept on file Please provide credit card number</p>
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CITY OF PIEDMONT
DEPARTMENT OF RECREATION
WILDWOOD SCHOOLMATES
420-3076

NAME _____
GRADE _____
NAME OF PARENT & DAYTIME CONTACT NUMBER _____
PERSON AUTHORIZED TO PICK UP _____

- A 7:30 - 8:30AM
- B 8:30 - 9:30AM
- C 9:30 - 11:00AM
- D 11:00 - 11:50AM
- E 11:50 - 1:00PM
- F 1:00 - 1:45PM
- G 1:45 - 3:00PM
- H 3:00 - 4:00PM
- I 4:00 - 5:00PM
- J 5:00 - 6:00PM

May & June 2010

****All calendars are due within the first five business days of the month. Any calendar turned in after this time will be charged the drop-in rate.****

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
3	4	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28
31	June 1	2	3	4
7	8	9	10	11
14	15	16	17	18
			Last Day of School 12:05 Dismissal	No Program

Check the time blocks needed and the code letters into the appropriate calendar date boxes. Add the number of letters you have placed through the entire calendar. Multiply this number by the rate that applies to you.

# of letters _____	x \$5.75 RESIDENTS ONLY	= Total _____	
	x \$7.75 NON RESIDENTS	= Total _____	
For days where total use is 4 hours or more:			
# of letters _____	x \$5.50 RESIDENTS ONLY	= Total _____	OVERALL TOTAL

NO CASH CAN BE ACCEPTED FOR PAYMENT. Please return calendars as soon as possible. Drop-ins are accepted on a space availability basis with 24 hour advance notice at \$7.75 per hour OR PURCHASE AN 18 DROP-CARD at \$7.00 per hour.

Parent's Signature _____

Date _____

CHARGE TO MY _____ M/C _____ VISA _____ AMEX CARD # _____ EXPIRATION DATE: _____ AUTHORIZED SIGNATURE _____	<p>*Card numbers NOT kept on file Please provide credit card number</p>
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