

East Bay School of the Arts Camp 2005

Mailing Address: 5245 College Ave., #324, Oakland, CA 94618

Extended Care Information



PRE-REGISTRATION FOR EXTENDED CARE

\$4 per morning or afternoon extended care period

To use extended care, you must pre-register. When you apply for Extended Care, you must enclose with this form a **non-refundable check for the entire amount of time that you have requested.**

When calculating the amount of your payment, multiply \$4 times the number of morning and/or afternoon slots you have requested. For example, if you apply for Monday through Friday morning Extended Care for one session (3 weeks or 15 days), you will owe \$60 (\$4 x 5 days x 3 weeks). If you sign up for only two days a week of afternoon Extended Care, you will owe \$24 (\$4 x 2 days x 3 weeks), and so on.

NO DROP-IN EXTENDED CARE

There is no drop-in extended care.

PENALTY FOR LATE PICK-UP

EBSA charges \$15 for every 15 minutes that you arrive:

- after 4:30 pm, if your child is not pre-registered for extended care, or
- after 6:00 pm., whether or not your child is pre-registered.

You may pay late fees by cash or check. Checks should be made payable to EBSA

CANCELLATION OF PRE-REGISTRATION

There will be no refunds after you have pre-registered for extended care.

Request Form for Extended Care

Please return this form with payment by June 15, 2005

Child's Name: _____

Child's Grade Last Year (2004 - 05): _____

Child's age as of June 1, 2005: _____ years, _____ months

Check Times: Session 1 (6/20–7/8/05): _____ Full Day (9 am–4:30 pm) _____ Half Day (9 am–12 pm)
Session 2 (7/11–7/29/05): _____ Full Day (9 am–4:30 pm) _____ Half Day (9 am–12 pm)
Session 3 (8/01–8/19/05): _____ Full Day (9 am–4:30 pm) _____ Half Day (9 am–12 pm)

Circle Session and Days (Each circled time-slot costs \$4):

Session 1	Week 1: _____ Morning (8–9 am, M T W Th F)	_____ Afternoon (4:30–6 pm, M T W Th F)
	Week 2: _____ Morning (8–9 am, M T W Th F)	_____ Afternoon (4:30–6 pm, M T W Th F)
	Week 3: _____ Morning (8–9 am, M T W Th F)	_____ Afternoon (4:30–6 pm, M T W Th F)
Session 2:	Week 1: _____ Morning (8–9 am, M T W Th F)	_____ Afternoon (4:30–6 pm, M T W Th F)
	Week 2: _____ Morning (8–9 am, M T W Th F)	_____ Afternoon (4:30–6 pm, M T W Th F)
	Week 3: _____ Morning (8–9 am, M T W Th F)	_____ Afternoon (4:30–6 pm, M T W Th F)
Session 3:	Week 1: _____ Morning (8–9 am, M T W Th F)	_____ Afternoon (4:30–6 pm, M T W Th F)
	Week 2: _____ Morning (8–9 am, M T W Th F)	_____ Afternoon (4:30–6 pm, M T W Th F)
	Week 3: _____ Morning (8–9 am, M T W Th F)	_____ Afternoon (4:30–6 pm, M T W Th F)