



Student's Name: \_\_\_\_\_ Teacher's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

My child requires different hours and/or days of extended care service. I request the following change:

Before school (7:00 am - 8:00 am) Days: \_\_\_\_\_

After School (3:45 pm - 6:00 pm) Days: \_\_\_\_\_

\_\_\_\_\_

The fee of this change will be reflected on your next bill according to the published rates of Vineyard Christian Secondary School.

If this is a temporary change, please list the beginning and ending dates you need.

Beginning date \_\_\_\_\_, ending date \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

Approved by: \_\_\_\_\_  
Director's Signature

\_\_\_\_\_  
Date