

Thursday, October 29, 2009
Half-Day Kindergarten Non-School Day

Child's Name _____ Grade _____
Child's Name _____ Grade _____
Child's Name _____ Grade _____

Options: (please check)

- Full day (6 hrs or more) \$28.00
- 1/2 day (6 hrs or less) \$17.00 (List specific hrs _____)
- will not attend

Parent/Guardian Signature Date **Total Enclosed \$** _____

*Payment must be attached to coupon
Make checks payable to ISD 279*

Due Date: Thursday, Oct. 15, 2009

Friday, October 30, 2009
Half-Day Kindergarten Non-School Day

Child's Name _____ Grade _____
Child's Name _____ Grade _____
Child's Name _____ Grade _____

Options: (please check)

- Full day (6 hrs or more) \$28.00
- 1/2 day (6 hrs or less) \$17.00 (List specific hrs _____)
- will not attend

Parent/Guardian Signature Date **Total Enclosed \$** _____

*Payment must be attached to coupon
Make checks payable to ISD 279*

Due Date: Thursday, Oct. 15, 2009