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Valley Stream

Christian Academy

A Ministry of Bethlehem Assembly of God

VSCA EARLY MORNING DROP OFF

Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Child’s Grade\_\_\_\_\_

Parent/Guardian Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please circle the dates your child will be attending Early Morning Drop Off:

**March 2019**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **MONDAY** | **TUESDAY** | **WEDNESDAY** | **THURSDAY** | **FRIDAY** |
|  |  |  |  | **1** |
| **4** | **5** | **6** | **7** | **8** |
| **11** | **12** | **13** | **14** | **15** |
| **18** | **19** | **20** | **21** | **22** |
| **25** | **26** | **27** | **28** | **29** |

Fee: $4 per day, 1st Child

 $2 per day, each additional child

Amount Paid: $\_\_\_\_\_\_\_ Today’s Date:\_\_\_\_\_\_\_ Received By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This form, along with payment, is required NO Later than the Friday before the week of the above listed dates.