

# FEBRUARY 2026

ATTENDING SCHOOL:

CHILDRENS NAMES:



School sites:  
Deane  
Lumberg  
Patterson  
Rose Stein

## JEFFCO SA Before/After Tuition

	<u>MONDAY</u>	<u>TUESDAY</u>	<u>WEDNESDAY</u>	<u>THURSDAY</u>	<u>FRIDAY</u>
WEEK OF: 2/2	FEB 2	FEB 3	Feb 4	FEB 5	FEB 6
	Before:  After:	Before:  After:	Before:  After:	Before:  After:	Before:  After:
WEEK OF: 2/9	FEB 9	FEB 10	FEB 11	FEB 12	FEB 13
<b>FULL DAY PROGRAM 2/14 @ EIBER</b>	Before:  After:	Before:  After:	Before:  After:	Before:  After:	<b>FULL DAY: @ EIBER</b>
WEEK OF: 2/16	FEB 16	FEB 17	FEB 18	FEB 19	FEB 20
	<b>ALL PROGRAMS CLOSED 2/16</b>	Before:  After:	Before:  After:	Before:  After:	Before:  After:
WEEK OF: 2/23	FEB 23	FEB 24	FEB 25	FEB 26	FEB 27
	Before:  After:	Before:  After:	Before:  After:	Before:  After:	Before:  After:

### STEPS FOR CARE CALCULATION:

1. Enter 1 next to the before/after/full day sessions you need care. '0' means NO CARE; '1' means NEED CARE.
2. Confirm number of sessions are correct below. Add number of children and confirm/add total.
3. Payment must accompany calendar to reserve spot.
4. Limited space available. **Payment is due by the Wednesday of the prior week**, however we do encourage earlier payments to secure a spot. Calendars are also required for CCAP families to reserve their space.
5. For Safety and tracking purposes, please inform Director of any care schedule changes. NO refunds or credits for unused care.

**DUES CALCULATION:** Before Care Sessions: \_\_\_\_\_ X

After Care Sessions: \_\_\_\_\_ X

Full day Care Sessions (in house): \_\_\_\_\_ X

Before: After:

Subtotal:

X Number of Children=

**TOTAL DUE:**



\*\*Spots reserved \$6/session (\$12/full day) drop-in fee applies to all payments/  
schedules not received by Wednesday for upcoming week.