

**BARABOO SCHOOL DISTRICT KID STOP PROGRAM**

STUDENT(S) NAME \_\_\_\_\_ WEEK OF \_\_\_\_\_ SCHOOL \_\_\_\_\_

<b><i>MORNING KID STOP - \$3/CHILD/MORNING</i></b> <i>(PLEASE "X" MORNINGS YOUR CHILD/CHILDREN WILL BE ATTENDING)</i>				
MONDAY _____	TUESDAY _____	WEDNESDAY _____	THURSDAY _____	FRIDAY _____

<b><i>AFTER-SCHOOL KID STOP - \$5/CHILD/AFTERNOON</i></b> <i>(\$3/CHILD/DAY FOR ANY ADDITIONAL CHILDREN IN THE SAME FAMILY)</i> <i>(PLEASE "X" AFTERNOONS YOUR CHILD/CHILDREN WILL BE ATTENDING)</i>				
MONDAY _____	TUESDAY _____	WEDNESDAY _____	THURSDAY _____	FRIDAY _____

**Mornings**      \_\_\_\_\_ x \$3 x \_\_\_\_\_ children = \$ \_\_\_\_\_

**After-School**    **One child:** \_\_\_\_\_ afternoons x \$5 = \$ \_\_\_\_\_  
**Two children:** \_\_\_\_\_ afternoons X \$8 = \$ \_\_\_\_\_  
**Additional siblings - please add \$3/child/day = \$ \_\_\_\_\_**

**TOTAL AMOUNT DUE = \$ \_\_\_\_\_**    **Check # \_\_\_\_\_**    **Cash \$ \_\_\_\_\_**    **Bill me on-line \_\_\_\_\_**

<p><b>ADDITIONAL INFORMATION:</b></p>   
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