



41 Foster Street Unit 5  
Arlington, MA 02474-6843  
781-316-8090

## Extended Day Pre-registration Form

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Participant's Names: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home Telephone Number: \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_

Emergency Contact Person and Phone Number: \_\_\_\_\_

Adult(s) other than parent or guardian authorized to pick up child(ren):

1. \_\_\_\_\_

2. \_\_\_\_\_

**Fees:** Extended Day with ACT is \$15 an hour or \$20 a day per child, or \$80 for the week for both morning and afternoon. Siblings are an additional \$5 a day and \$20 a week. Weekly rates are available only by pre-registration for extended day.

Late pickup will result in late fees of \$15 an hour or portion thereof after 5 PM.

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Please check off all that apply, and add the total amount to your check, made out to ACT.

8:30- 9:00 AM	4:00-5:00 PM	Circle the days needed:	Cost:
Session I, July 9th	_____	_____	Tu We Th Fr _____
Session I, July 16th	_____	_____	M Tu We Th Fr _____
Session II, July 23rd	_____	_____	M Tu We Th Fr _____
Session II, July 30th	_____	_____	M Tu We Th Fr _____
Session III, August 6th	_____	_____	M Tu We Th Fr _____
Session III, August 13th	_____	_____	M Tu We Th Fr _____

**TOTAL:** \_\_\_\_\_