



850 Cranberry Woods Drive, Cranberry Township, Pa 16066

PHONE: 724-741-1008 WEB: www.heartprintsed.org EMAIL: heartprintsed@gmail.com

## 2015/2016 EXTENSION REQUEST FORM

Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Phone number and email address: \_\_\_\_\_

**All requests for extensions must be submitted in writing to the HeartPrints' office.**

**Please check the type(s) of extension(s) you are requesting and circle the appropriate days of the week.**

\_\_\_\_\_ Morning Extension: 8:00 – 9:00 AM M T W TH F

\_\_\_\_\_ Lunch Extension: 12:00 – 12:45 PM M T W TH F

\_\_\_\_\_ Afternoon Extension 4:00 – 5:00 PM M T W TH F

\*Please note – Lunch extensions are available to both morning and afternoon students. Staff will deliver children to their afternoon teachers.

Is this a flexible or yearly extension? \_\_\_\_\_ Flexible \_\_\_\_\_ Yearly

If it is a flexible request, which dates(s) do you want in September? \_\_\_\_\_

Extension fees are \$10.00 per child/per extension. There are no partial extensions. Extensions are billed according to actual class days in each month. Families are expected to pay for scheduled extensions even if your child is absent. Charges for extensions will be included on your monthly invoice and payable upon receipt of this invoice.

**For additional information, please contact a member of our staff.**