



## **DROP-IN REQUEST FORM**

Please fill out request form and submit within a minimum of 24 hours' notice.\*

We will notify you as soon as we can accommodate your request.

**Payment is due with this form.**

Please be advised that as soon as space and/or transportation are available, payment is non-refundable.

Student's Name: \_\_\_\_\_

Drop in date(s): \_\_\_\_\_

**Hourly Drop-In Fee:** \$20.00/hour (partial hours are charged for the full hour).  
(Drop-in Time: from \_\_\_\_\_ to \_\_\_\_\_ Total number of hours: \_\_\_\_\_)

### **LSA Elementary & School Age:**

- |  |               |
|--|---------------|
| <input type="checkbox"/> In-Service Days (8:30 – 2:30) | \$ 55.00/day  |
| <input type="checkbox"/> In-Service Days (7:00 – 6:00) | \$ 90.00/day  |
| <input type="checkbox"/> Drop-In Transportation        | \$ 25.00/ride |

- \*Transportation requests need a week's advance request.
- Sibling discounts do not apply to drop in requests.
- \$1/minute per child late fee applies to any late pick up. \$5/minute fee after 15 minutes late.

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Parent's name printed/Signature/Date of request

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#### **For Office Use:**

Date request received; \_\_\_\_\_

Payment received:  Yes  No Cash \_\_\_\_\_ Check #: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Classroom staff emailed  Yes  No