

St. Norbert School 2024-2025 CARES Program

Month: February 2025

Family Last Name: _____

Child or Children First Name(s)	Grade
(1) _____	_____
(2) _____	_____
(3) _____	_____

CARES will be invoiced directly to your Blackbaud Tuition Management account which will help streamline your payment processing. All Cares paperwork must be completed in full for your child to attend Cares. Paperwork was sent home in summer packets. A \$35.00 registration fee will be applied annually to utilize Cares.

Please **circle** the days & dates that your child or children will be attending CARES.

Monday	Tuesday	Wednesday	Thursday	Friday
3rd	4th	5th	6th	7th
10th	11th	12th	13th	No Cares
17th	18th	19th	20th	21st
24th	25th	26th	27th	No Cares Play
31st				

Please return the completed form to Mrs. Myers **no later than Feb. 15th**

CARES Internal Use Only

# of Days _____	@ Rate \$ _____	= \$ _____	Invoiced By _____
# of Days _____	@ Rate \$ _____	= \$ _____	Invoiced By _____
# of Days _____	@ Rate \$ _____	= \$ _____	Invoiced By _____