

EXTRA DAY REQUEST FORM 2023-24

- Request must be submitted 48 Business hours prior to requested additional date.
- Please note that space may not be available to accommodate your request due to individual site enrollment. You will receive an email confirming your request has been approved.
- Please Submit Request to Sunset Community Center— 710 Western Avenue,
 Fax to (630) 232-4569 or email to info@genevaparks.com

Child's Name			School/KZ Site			
Parent/Guardian Name		Phone #				
Parent/Guardian Email						
Extra Service Requested	d (Please o	check desired s	ervice):			
M (6:30am—8:00am) - \$1	3					
PM (2:00pm—6:00pm) - \$26			Requested Date:			
Early Dismissal (11:20am—6	5:00pm) - :	\$40				
TOTAL AMOUNT DUE:		_				
Payment Information:	Visa	Mastercard	Discover	AMEX		
Name on Card	Billing Zip Code:					
Card Number			Expiration Date		CVV	
Signature of Parent/Guardian Date						
	_					
OFFICE USE ONLY						
Approved by:	_ Date:	Date: Site Coordinator notified by/date:				
Amount Due:	Date P	aid:				