

**St. Madeline-St. Rose
C.A.R.E.S. Program
Parents' Agreement**

I/We will not drop off my child(ren) prior to 7:00am or pick-up my child(ren) after 6:00pm.

I/We understand that if my child(ren) is/are not picked up by 6:00pm. there is a late fee of \$15.00 to be paid separately.

I/We agree to the payment program.

Parent Signature _____ Date _____

Parent Signature _____ Date _____