
Child's Name:

Grade:

Phone:

Email:

Emergency Contact:

Please check the preferred time slot(s) for each day of the week:

Monday:

2:00 pm - 3:00 pm

3:00 pm - 5:30 pm

Tuesday:

2:00 pm - 3:00 pm

3:00 pm - 5:30 pm

Wednesday:

2:00 pm - 3:00 pm

3:00 pm - 5:30 pm

Thursday:

2:00 pm - 3:00 pm

3:00 pm - 5:30 pm

Friday:

2:00 pm - 3:00 pm

3:00 pm - 5:30 pm

Notes/Comments:

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Please return this sign-up sheet to the Sprouts Aftercare staff by
[deadline date].

Thank you for your cooperation!