



# SurroundCare Weekly Schedule

(616) 842-5420 Mon.-Fri. 7:00 a.m.-5:30 p.m.

Email: [surroundcare@grandhavenchristian.org](mailto:surroundcare@grandhavenchristian.org)

Billing questions: [mbillett@grandhavenchristian.org](mailto:mbillett@grandhavenchristian.org)

Guardian/Parent Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Emergency number: \_\_\_\_\_

*One week's schedule per sheet unless designated as MASTER  
Partial hours figured to next 1/4 hour : After School Care for Y5 and up begins at 2:45pm*

DATE	CHILD NAME(S)	DROP-OFF	To CLASS	Day Care Lunch / Milk	From CLASS	PICK-UP
<b>Monday</b>				Lunch W - C - H <sub>2</sub> O		
Date				Lunch W - C - H <sub>2</sub> O		
/ /				Lunch W - C - H <sub>2</sub> O		
<b>Tuesday</b>				Lunch W - C - H <sub>2</sub> O		
Date				Lunch W - C - H <sub>2</sub> O		
/ /				Lunch W - C - H <sub>2</sub> O		
<b>Wednesday</b>				Lunch W - C - H <sub>2</sub> O		
Date				Lunch W - C - H <sub>2</sub> O		
/ /				Lunch W - C - H <sub>2</sub> O		
<b>Thursday</b>				Lunch W - C - H <sub>2</sub> O		
Date				Lunch W - C - H <sub>2</sub> O		
/ /				Lunch W - C - H <sub>2</sub> O		
<b>Friday</b>				Lunch W - C - H <sub>2</sub> O		
Date				Lunch W - C - H <sub>2</sub> O		
/ /				Lunch W - C - H <sub>2</sub> O		