

Co-op information School Year

Child's Name _____

Parent's Name _____

Will you be co-oping this school year?

____yes

____no

*Just a reminder: Siblings are not able to come in the classroom when you work as a co-op parent.

Are you interested in being on a list of potential co-op substitutes? *This list will be used by our directors for scheduling subs and will be published in the directory for other parents to use.*

____yes ____no

If you are interested, which days (check all that apply) would you be able to work?

____Monday

____Tuesday

____Wednesday

____Friday

Working as a co-op sub earns you one \$35 credit toward tuition per day.