

Friends School of Minnesota  
**EXTENDED DAY RELEASE DAY CONTRACT**

**FRIDAY, JANUARY 30, 2026**

All-day Release Day, 8:00 a.m.-5:00 p.m.

**Registration closes on Friday, January 23** or when we are full, whichever happens first.

**Operation is contingent upon sufficient registration.**

**CONTRACT & COSTS.** Any current FSMN student may attend release days with a release day contract. ***There are no drop-ins on release days.*** The cost is \$13.00 per hour and \$6.50 for any portion of a half hour. Drop-off and pick-up times are contracted only at the top of the hour and at the **even half hour**, for example, 8 a.m.-4:30 p.m. (not 8:15 a.m.-4:15 p.m.). **If you need to cancel your release day contract, you will receive a refund if you cancel up to twenty-four hours before the release day. Cancellations later than that will not receive a refund.**

**RELEASE DAY PROGRAM.** Students have supervised activities in the multipurpose room, in the gym, and on the playground (weather permitting). Release days are staffed by regular Extended Day/FSMN personnel.

**All students must bring their own lunch and lunch beverage.** There is no school lunch on release days. **Lunch is at noon**, followed by recess. Students have a half hour of **quiet time** after recess; please send your child with a book to read then. We provide a release day snack in the morning and in the afternoon.

**RELEASE DAY MOVIE.** Students who are with us in the afternoon will help us choose a movie from the Extended Day movie library to show. ***We will let you know the day's movie choices in advance. If we do not hear from you, we will assume your child has permission to watch any movie that we choose.***

| DATE   | CHILD(REN)'S<br>NAME(S)/GRADE(S) | DROP-OFF<br>TIME | PICK-UP<br>TIME | TOTAL<br>HOURS | TOTAL COST@<br>\$13.00/hour and<br>\$6.50/any portion<br>of a half hour |
|--|----------------------------------|------------------|-----------------|----------------|---|
| Friday, January<br>30, 2026<br>8:00 a.m.-5:00 p.m. |                                  |                  |                 |                |   |

|                                 |  |
|---------------------------------|--|
| Sub-total                       |  |
| Minus financial aid<br>discount |  |
| Total                           |  |

Parent Signature\_\_\_\_\_

Date\_\_\_\_\_

**Please return this contract to the front office. You will be billed through FACTS.**