



Before, Extended, and After School Care Registration Form

Registration Fee is due upon receipt of this form.

Annual Registration Fee:

- 1 Child \$25
- 2 Children \$40
- 3 Children \$50

Billing statements are mailed monthly. *I understand that I am responsible for all charges and late pick-up fees, and will pay all outstanding balances by June 30th.*

 Print Your Name Daytime Phone

 Parent/Guardian Signature Date

Child's Name	Grade

My Child(ren) will attend the following days and times:

	Before School Care (offered 6:30 a.m. – 7:30 a.m.)	Extended Care (offered 10:50 a.m. – 2:40 p.m.)	After School Care (offered 2:40 p.m. – 5:45 p.m.)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

After School/Extended Care Pick-up Authorization:

I, _____ hereby authorize the following people to pick up my child from the after school/extended care program and leave the school. I understand that for the protection of my child, staff may require identification be presented. I also understand that no other person will be allowed to take my child from the after school/extended care program without my permission.

Name	Relationship	Phone Number