AFTER SCHOOL PROGRAM WEEKLY REGISTRATION

My child/children will attend the After School Program next week ________________(date) on the following days @ the rate of $16/day 1st child, $4 each additional child after regular school day(2:15pm-6pm) and $22/day 1st child, $8 each additional child during early dismissal days (12:15pm-6pm). Monthly rate available, please contact the school. A $5.00/per student late registration fee will be assessed if not registered in advance. For late daily registration, please call the school by 10am.

Monday: __________
Tuesday: __________
Wednesday: __________
Thursday: __________
Friday: __________

Child: ____________________________ Grade: ________
Child: ____________________________ Grade: ________
Child: ____________________________ Grade: ________

TOTAL AMOUNT ENCLOSED: ____________ check # __________

Parent’s signature: ____________________________

Kindly complete to help us with staffing.

My child/children will attend the program:

Full time: ______
Part time: ______
Occasionally: ______

My child/children will be picked up at approximately @ _________ o’clock when attending.

Please return this form with payment on the Tuesday before the week or child/children will not be permitted to attend the After School Program that week.