AFTER SCHOOL REGISTRATION FORM

(Please complete one form for each child)

Student Name: _____

Grade: _____

Parent Name: _____

Day(s) per week: Circle: Mon. Tues. Wed. Thurs. Fri.

My child may do homework: Yes _____ No _____

Emergency Telephone Number: _____

Name of persons other than parents who have permission to pick up your child:

_____

_____

I understand that payment must be made at the beginning of each month. If I fall behind more than a month, my child will **NOT** be allowed to attend the program until full payment has been made.

I understand that pick up time in no later than 5:30 p.m. If I am late, there will be a late fee to be paid the **NEXY DAY**. If this happens more than **3 times,** my child will no longer be allowed to attend the after school program.

I understand that homework could be done at the after school program. If I choose to have my child do homework, I will still need to check it at home.

Parent Signature: _____

Date: _____

REGISTRATION FEE: $30.00 (IS ENCLOSED) YES _____