



Before, Extended and After School Care Registration Form

Registration fee is due upon receipt of this form.

Annual Registration fee:

- 1 child – \$25.00
- 2 children -- \$40.00
- 3 children -- \$50.00

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

Parent/Guardian Signature

Date

Print Your Name

Daytime Phone

Student Name

Grade

_____	_____
_____	_____
_____	_____

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

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

After School/Extended Care Pickup 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 that 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 written permission.

Name	Relationship	Phone Number
#1 _____	_____	_____
#2 _____	_____	_____
#3 _____	_____	_____

“Celebrating Spiritual Growth While Providing Academic Excellence in a Christ Centered Environment”