



BEFORE & AFTER SCHOOL

REGISTRATION / CONTACT FORM

Student Information

Name _____ Grade _____

Contact Information

Parent 1

Name _____

Relationship to Student _____

Cell # _____ Home # _____

Work # _____

Parent 2

Name _____

Relationship to Student _____

Cell # _____ Home # _____

Work # _____

In the event of an emergency, and I cannot be reached, the following persons should be contacted and have permission to pick up my child(ren):

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Are there any medical concerns the staff of the Before/After School Program should be aware of?
 _____ Yes or _____ No

PLEASE EXPLAIN:

**** Administration reserves the right to add charges to your FACTS Tuition Management Account for any outstanding financial obligations. Before/After School charges are billed monthly through FACTS Tuition Management System. You will receive an email when charges have been added to your FACTS account. FACTS accounts that are 60days past due may result in your child not able to attend until arrears are paid.**

Parent/Guardian Signature _____

Date _____

Program Rates:

Before School 7:00am-7:45am \$6.00/day

After School 3:00pm-4:00pm \$7.00/day

3:00pm-5:30pm \$14.00/day

1st Fridays K-8 After Care set rate at \$25 per child
 (Early Dismissal)

For staffing purposes please fill in the days you expect your child(ren) to attend the B/A School program. Attendance may have to be limited to meet health and safety guidelines.

Program	Mon	Tue	Wed	Thur	Fri
Before School					
After School 3:00-4:00pm					
After School 3:00-5:30pm					
1 st Fridays (Early Dismissal)					
Occasional Drop In					