

Extended Day Care 2018 – 2019 / Christ the King Catholic School

REGISTRATION FORM

WRAP AROUND (Pre-Kindergarten 4)

EXTENDED DAY CARE (Pre-Kindergarten 4 to Grade 8th)

Extended Care/PreK-4 Extended Care is a service provided for parents at a minimal cost and is available in conjunction with the school calendar. When school is not in session, Extended Care is not available to the students.

PLEASE COMPLETE

1. Full Name of Child _____ Age: _____ Grade Entering: _____
 Full Name of Child _____ Age: _____ Grade Entering: _____
 Full Name of Child _____ Age: _____ Grade Entering: _____
 Full Name of Child _____ Age: _____ Grade Entering: _____

2. Child's Home Address: _____

3. Home Phone: _____

4. Father:

Name: _____
Cell Phone: _____
Work Phone: _____

5. Mother:

Name: _____
Cell Phone: _____
Work Phone: _____

6. Person (other than Parent) to contact in an emergency: (In order of priority from A to D)

A) Name: _____
Phone: _____
Relationship: _____

B) Name: _____
Phone: _____
Relationship: _____

C) Name: _____
Phone: _____
Relationship: _____

D) Name: _____
Phone: _____
Relationship: _____

7. Christ the King School has my consent, in an emergency, to take necessary steps to obtain medical attention for my child.

Signature of Parent/Legal Guardian

Date

FEES: -Registration Fee of \$50 per family is non-refundable, to be paid by August 1, 2018.

-Extended Day Care must be paid by the first of the month and is due on a (10) month basis.

-The first payment is due August 1, 2018, with the last payment (#10) due May 1, 2019.

-A late fee of \$25.00 will be added after the third of the month.

Please check the services that you will need:

<u>Pre-Kindergarten Four – Wrap Around Program</u>	
Yearly Cost	
<input type="checkbox"/> Wrap Around	\$1,650 per year
<input type="checkbox"/> Wrap Around + Ext Care	\$3,300 per year

<u>Extended Day Care</u>	
Yearly Cost	
<input type="checkbox"/> 1 Child	\$1,650 per year
<input type="checkbox"/> 2 Children	\$2,300 per year
<input type="checkbox"/> 3 Children	\$2,900 per year

FOR OFFICE USE ONLY

Date _____ Check # _____ Cash _____ Amount Pd _____