



## **Kindergarten - 12th Grade Before/After School Care Registration Form 2022-2023**

Registration form must be completed before July 1 to be guaranteed a seat in either extended day program. Each year you must re-register your child. Registration does not roll over year to year.

**BEFORE CARE:** Available at 7:15 am

**For the safety of your child, please complete the enrollment form before sending your child to before care.**

Daily rate: \$12. - You will be billed at the end of each month.

Monthly rate \$600 for the year - 10 monthly payments of \$60 will automatically be charged to your account following our tuition schedule.

Enrollment after July 1 will be based on availability and rates will be prorated.

**AFTER CARE:** Available until 6:00 pm.

**For the safety of your child, please complete the enrollment form before sending your child to aftercare.**

Daily rate: \$12. - You will be billed at the end of each month. For your child's safety, please complete the application.

Monthly rate: \$2,250 for the year - 10 monthly payments of \$225. will automatically be charged to your account following our tuition schedule.

Enrollment after July 1 will be based on availability and rates will be prorated.

Aftercare students **MUST** be picked up by 6:00 pm.

### **LATE FEE PENALTY:**

First occurrence - Late fee of \$15 after 6:00 and an additional \$15 for every 15 minutes past closing time.

Second occurrence - Late fee of \$25 after 6:00 and an additional \$15 for every 15 minutes past closing time.

Third occurrence - Late fee of \$35 after 6:00 and an additional \$15 for every 15 minutes past closing time and a meeting / phone call with administration.

Additional occurrences will incur a continued and incremental \$10 increase to the late fee and possible dismissal from the program.



**SIBLING BEFORE CARE:** Available at 7:30 am. Allows you to drop off your preschool through 5th grade students when you drop off your middle or high school students. A nominal fee of \$75 per child/ \$150 max per family for the entire year should be paid with the aftercare registration form.

**SIBLING AFTER CARE:** Available for parents who have students in different grade levels with different dismissal times that prefer to do only one pick up time. A nominal fee of \$75 per child/ \$150 max per family for the entire year should be paid with the registration form. (This is not available for half day preschool classes)

**BOTH BEFORE AND AFTER SIBLING CARE:** Families that require both services for the same siblings will be charged \$125 per year per child/ \$250 max.

Sibling care is not prorated. The annual fee is charged in full the first day of the student attending.

ALL students MUST be picked up by someone identified on the student's registration form. Any person unknown to us will be asked to provide identification for verification.



**Kindergarten-12th Grade  
Before/After School Care Registration Form 2022-2023**

**BEFORE AND AFTER SCHOOL CARE:**

\_\_\_ Before school care / Approximate drop off time: \_\_\_\_\_

\_\_\_ After school care / Approximate pick up time: \_\_\_\_\_

Grade: \_\_\_ Student's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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Grade: \_\_\_ Student's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

**SIBLING CARE:**

\_\_\_ Sibling before school care: I will be dropping off my elementary student between 7:30-7:45 along with my MS/HS student.

Elementary Student(s): \_\_\_\_\_

MS/HS Student(s): \_\_\_\_\_

\_\_\_ Sibling after care: I will be picking up my middle school student when I pick up my elementary students.

MS Student(s): \_\_\_\_\_

Elementary Student(s): \_\_\_\_\_

\_\_\_ Sibling after care: I will be picking up my elementary student/ MS student when I pick up my high school student.

Elementary/ MS Student(s): \_\_\_\_\_

HS Student(s): \_\_\_\_\_



**Parent/Guardian Information:**

Mother's Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**Other Adults Authorized To Pick Up Student:**

Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Please list ALL allergies:

\_\_\_\_\_

What procedures should be followed?  
EPI pen: YES or NO

Anything else the aftercare teacher would need to know:

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_