

**2023-24 Before/Aftercare Registration Form.**

The Before/Aftercare Program will begin on Wednesday, September 6th, 2023. Please fill out the following registration form for students attending Before / Aftercare on a weekly basis.

Registration forms must be sent in to the school office by September 6th.

**Before/Aftercare Fee**

The Before/Aftercare fee is \$5.00 (flat rate) per hour per child. Participants will receive a payment notice sent home with their child on Thursday for the previous week's attendance.

Repeated failure to pay by the due date will result in the suspension of utilizing the program.

**Students Enrolled in Aftercare**

Once you have enrolled in the program, you will only need to provide a note to your child's teacher and aftercare staff, if your child **will not** be attending aftercare on their scheduled day.

(Please use the Aftercare note provided in the aftercare link.) Please circle the days your child/children will attend.

**Students Attending Occasionally**

Those parents utilizing the aftercare program **occasionally**, must send in a note **only** on the day your child will be attending the program. Please use the Aftercare note provided in the aftercare link.

**Do not fill out a registration form for aftercare.**

**Before Care** grades PREK- 8th (6:45 AM – 8:30 AM)

Monday Tuesday Wednesday Thursday Friday

**After Care** grades PREK- 8th (2:30 PM – 6:00 PM)

Monday Tuesday Wednesday Thursday Friday

**Family Information**

Family's Last Name \_\_\_\_\_

Student's First Name \_\_\_\_\_ Homeroom \_\_\_\_\_ Age \_\_\_\_\_

Student's First Name \_\_\_\_\_ Homeroom \_\_\_\_\_ Age \_\_\_\_\_

Student's First Name \_\_\_\_\_ Homeroom \_\_\_\_\_ Age \_\_\_\_\_

Student's First Name \_\_\_\_\_ Homeroom \_\_\_\_\_ Age \_\_\_\_\_

Mother's Last Name \_\_\_\_\_ First \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Father's Last Name \_\_\_\_\_ First \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

### **Release Information**

Please list three (3) additional adults (over 18) authorized to pick up your child/children from the program. In an emergency, we will always try to contact the parents listed on the page first. If we cannot reach the child's parents, the individuals below will be called in the order listed.

1st. Name \_\_\_\_\_ Phone# \_\_\_\_\_

2nd. Name \_\_\_\_\_ Phone# \_\_\_\_\_

3rd. Name \_\_\_\_\_ Phone# \_\_\_\_\_

A nurse will not be available during the before and after school program. Medication may not be given by staff, including inhalers.

Does your child have any medical conditions? Describe \_\_\_\_\_

Does your child have any food/medical allergies? Describe \_\_\_\_\_

### **Authorizations**

I understand that my/our signatures represent that I/we agree to abide by the policies and procedures in the St Dominic School 2023 – 2024 Parent Handbook and accept financial responsibility for services rendered. We agree to inform the After Care Staff in writing of any changes in the information we have provided on this registration form and any changes to our child's schedule.

Signature of Parent/ Guardian \_\_\_\_\_ Date \_\_\_\_\_

Print name of Parent/ Guardian \_\_\_\_\_

Signature of Parent/ Guardian \_\_\_\_\_ Date \_\_\_\_\_

Print name of Parent/ Guardian \_\_\_\_\_