



**EXTENDED DAY SCHOOL PROGRAM
2020-21 SCHOOL YEAR ENROLLMENT FORM**

***DUE TO COVID RESTRICTIONS FAMILIES MUST REGISTER BY AUGUST 28TH, 2020 –
NO DROP-INS WILL BE ALLOWED YOU MUST GIVE US A SCHEDULE SO WE HAVE
STAFFING. FAMILIES MUST NOTIFY THE SCHOOL AT LEAST 3 DAYS IN ADVANCE IF
THEY WILL NEED THIS SERVICE.***

STUDENT NAME

GRADE/YEAR

STUDENT ADDRESS:

Street

City Zip Telephone

PARENT OR GUARDIAN:

Name(s)

PHONE Home PHONE Work PHONE Cell

SPECIAL NEEDS/DIETARY RESTRICTIONS:

Alternate Emergency Contact:

Name(s) _____ Phone _____

TIMES NEEDED: ____ BEFORE CARE (6:30 AM – 8:30 AM CIRCLE M-T-W-TH-F)

After Care ____ SCHOOL DAY (3:00 PM – 6:00 PM CIRCLE M-T-W-TH-F)

____ HALF SCHOOL DAY (1 PM– 6:00 PM)

PARENT'S SIGNATURE: _____

**RETURN THIS FORM WITH \$20 BY AUGUST 28, 2020. THE BEFORE
AND AFTER CARE PROGRAM WILL NOT BEGIN UNTIL
SEPTEMBER 14, 2020**