

St. Nicholas School Extended School Program Registration Form

Child's Name _____ Level _____ Date _____

Nickname or preferred name _____ Birthdate _____

Name of other children living in the home	Age	School (if applicable)

Is there any information we should have about your child that would assist in our serving your child?

- Please enroll my child in the Hourly Plan Hourly Plan (\$5.00 per hour)
(for occasional / drop-in use)
- Please enroll my child in the Annual Plan 1 Annual Plan 1 (\$2500 annual payment)
- Please enroll my child in the Annual Plan 2 Annual Plan 2 (\$280 per month for 9 months)

My signature below indicates that (PLEASE CHECK EACH BOX

- I have read the General Policies and Procedures of the St. Nicholas Extended School Program. I understand that the Extended School Program adheres to these rules and I agree to follow the policies of this program and to fully explain to my child behavior which is acceptable in a school care setting.
- I understand that the failure of my child or me to follow these policies may result in our being discharged from the program.
- By signing below, I am stating that I have read and understand the Tennessee Standards for School-Administered Child Care Summary, and that St. Nicholas School follows these guidelines.
- By signing below, I am stating that I have had the opportunity to see/read the Child Abuse Curriculum Guidelines.

Parent/Guardian Signature

Date

To help us gauge the use of the various components offered by our program, please check all of the following services you will be likely to use during the year. Your response does not obligate you in any way.

<input type="checkbox"/> Early Morning Arrival	<input type="checkbox"/> Conference Care (all-day)
<input type="checkbox"/> ESP Primetime	<input type="checkbox"/> After School Activities (contracted classes)
<input type="checkbox"/> Conference Care (drop-in)	<input type="checkbox"/> Summer Camp