

Registration Date: _____

Price per hour: 1 child- \$4.50 2 children-\$6.00 3 children- \$8.00 each additional child- \$3.50

Child Information:

	First Name	M.I.	Last Name	Birthdate	Grade
1)	_____	_____	_____	_____	_____
2)	_____	_____	_____	_____	_____
3)	_____	_____	_____	_____	_____

Child(ren)'s Address: _____

Home Phone: _____

Parent/Guardian Information

Mother/Guardian First Name: _____ Last Name: _____

Address: _____

Home Phone: () _____ Business Phone: () _____

Cell Phone: () _____

Please circle which phone number should be used to reach you while your child is in the program.

Cell

Home

Business

Father/Guardian First Name: _____ Last Name: _____

Address: _____

Home Phone: () _____

Business Phone: () _____

Cell Phone: () _____

Please circle which phone number should be used to reach you while your child is in the program.

Cell

Home

Business

Who is/are the custodial parent? Mother _____ Father _____ Mother and Father _____

Please circle the days your child will be utilizing our program:

As needed Monday Am Tuesday Am Wednesday Am Thursday Am Friday Am

***Please note that we offer morning Extended Day only.**

BHCS- SACRED HEART CAMPUS
EXTENDED DAY REGISTRATION 2022-2023

Please list the exact drop off time your child(ren) will arrive for morning Extended Day. Students are dismissed to their classrooms at 8:30 a.m.

Monday _____

Thursday _____

Tuesday _____

Friday _____

Wednesday _____

*A copy of your child(ren)'s Emergency Medical Form(s) will be kept on file in the Extended Day Room.

Please list **three** people to pick up your child from the program due to illness, injury, or any other emergency.

1. Name: _____ Phone: _____

Address: _____ Cell Phone: _____

2. Name: _____ Phone: _____

Address: _____ Cell Phone: _____

3. Name: _____ Phone: _____

Address: _____ Cell Phone: _____

Please list anyone that is **NOT** allowed to pick up your child from the program:

Name: _____

Name: _____

Name: _____

Additional Comments & Information:

Is there is any other information that that would be helpful to our management and teaching staff?

Parent's Signature: _____ Date: _____

Thank You!