

## The Open Classroom After Care Registration Form 2011/2012

Child's Name \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Parent's Name(s) \_\_\_\_\_ Cell \_\_\_\_\_

\_\_\_\_\_ Cell \_\_\_\_\_

Home or Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Who will typically pick up your child? \_\_\_\_\_

Please **CIRCLE** days you are **REGISTERING** your child in the After Care program for **ON GOING ENROLLMENT**:

**MONDAY**

**TUESDAY**

**WEDNESDAY**

**THURSDAY**

**FRIDAY**

\*Note: The After Care Program may occasionally go on outings off campus, generally within walking distance. Your signature is required for your child to participate in these outings. We will communicate our plans with parents/caregivers in advance of each activity.

I, \_\_\_\_\_ give permission for \_\_\_\_\_

To participate in activities off campus with After Care Staff

Please list people authorized to pick up your child from After Care

1. \_\_\_\_\_ phone \_\_\_\_\_

2. \_\_\_\_\_ phone \_\_\_\_\_

3. \_\_\_\_\_ phone \_\_\_\_\_

Does your child have any allergies? \_\_\_\_\_

Other Info we should know \_\_\_\_\_

\*Note that the After Care program is a **pay-in-advance program**. The fee for child care is \$5.00 per hour or \$13.00 for an entire day, excluding half days.