

**ALL FAMILIES CURRENTLY IN THE PROGRAM MUST RE-REGISTER FOR 2021-2022  
\$90.00 Registration Fee Per Child Must Accompany This Registration Form**

**2021-2022 AFTER SCHOOL/EXTENDED CARE PROGRAM REGISTRATION FORM**

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_  
Last First

Address \_\_\_\_\_  
Street City/Town

Home Phone \_\_\_\_\_ Mother's Cell Phone \_\_\_\_\_  
Father's Cell Phone \_\_\_\_\_

Mother/Guardian \_\_\_\_\_  
Name  
Work Place Address Phone

Father/Guardian \_\_\_\_\_  
Name  
Work Place Address Phone

**\*I give the After School staff permission to release my child to the following authorized person/persons (other than a parent), who will be picking up my child on a regular basis from the After School Program.**

\*Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

1. \_\_\_\_\_  
NAME RELATIONSHIP PHONE

2. \_\_\_\_\_  
NAME RELATIONSHIP PHONE

**ALLERGIES/ILLNESSES/SPECIAL INSTRUCTIONS** \_\_\_\_\_

Please circle the days which you need the program. This schedule can be flexible. **This schedule will be given to your child's teacher in the fall, so please be sure to update the office if the days you use the program change.**

DAY: MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY  
Pick-Up \_\_\_\_\_  
Time - (Approximate)