

## Extended Care Registration 2020-2021

### Parent Information

Parents' Names: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip

Father's Phone: \_\_\_\_\_ Mother's Phone: \_\_\_\_\_

Father's Email: \_\_\_\_\_

Mother's Email: \_\_\_\_\_

### Child Information

1. Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

2. Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

3. Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

4. Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### Emergency Contacts

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### Authorized Pick Up

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### Medical Information

Please list any current food allergies, medication allergies, or any other health concerns.

**Hours Needed** -Please indicate the time frame(s) needed for each day with an x or expected time in the box.

Segments	Before School Care 7:00-7:45 (8:15 for 3s or nature-based PreK) \$5/hour billed in 15 minute increments	PreK Before School Care 7:45-9:00 \$6.25	Morning Care 3's Preschool 9:00-10:30 \$7.50	Morning Care 3's Preschool 10:15-11:30 \$6.25	Morning Care 4's Preschool 9:00-11:30 (until 12:00-nature-based PM class - \$15) \$12.50	Lunch Care <i>Students bring their own lunch.</i> 11:15/11:30-12:30 \$5	Afternoon Care 12:30-3:15 \$13.75	After School Care 3:15-6:00 \$5/hour billed in 15 minute increments
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								

**Notes**

1. In order to ensure proper staffing, please give the program director at least one week's notice before starting or discontinuing care.
2. This program is billed at the end of each month. Payment is due within 2 weeks of billing.
3. Parents may choose which hours or blocks are needed each day. Billing is calculated per day by adding the total of all of the day's hours.
4. Parents are expected to pay for all of their scheduled days each month regardless of absence due to situations such as a family vacation or child's illness.
5. Each child has five 'free passes' to use throughout the year for a missed day of care. **Please notify the director prior to the billing cycle** if you would like to use a pass for the month, and your bill will be credited.
6. You will not be charged for snow days or other unexpected changes in the school calendar.
7. Care is available for students in grades Kindergarten through 8th from 7:00-7:45 am and 3:15-6:00 pm
8. Care is available for Early Fives and PreK students before and after their scheduled class times between the hours of 7:00 am and 6:00 pm
9. In order to hold a spot in the DCS Extended Care program, an annual **\$30 non-refundable family registration fee is required.** This is not deducted from your first month's bill. Please include your \$30 payment when you turn in your registration form to the office. Checks can be made out to Dutton Christian School with extended care in the memo.

**Parent Commitment**

We promise to follow the guidelines of the Dutton Christian Extended Care Program as outlined in the parent handbook we received, agree to pay our fees as stated above, and attest that our child's health records are on file in the office.

Father's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mother's Signature: \_\_\_\_\_ Date: \_\_\_\_\_