

After School Care (ASC) Registration Form

Please complete the information below and submit it with a \$30 non-refundable registration fee before the start of the child's first after school care session.

lailing Address		Zip code				
elephone: Home	Work		_Cell			
arent E-Mail						
ave read, understand, and	agree to the guide	lines in the Afte	er School Care Ha	ındbook.		
arent/Legal Guardian Signature			Relationship			
Please Student Name	e Indicate Days Atte	nding and Estir	mated Pick-Up Tii	me Thursday	Friday	
	menday	racouay	- Councoudy			
ease indicate any known al	lergies for your chil	d(ren).				
·						
·	p Other Than Parer	nt	elationship	Phone N	lumber	
ease indicate any known al ersons Authorized to Pick U Na i	p Other Than Parer	nt	elationship	Phone N	lumber	