TRUE CROSS CATHOLIC SCHOOL

EXTENDED DAY REGISTRATION

THIS FORM MUST BE FILLED OUT BY ALL FAMILIES

There is no registration fee for EDP. Families may use these services at any time. Any student attending a.m. EDP will be billed for the month. Afternoon EDP is charged on a daily basis at the end of each month through the FACTS Incidental Billing System. (2020-21 Rates: a.m. $100/month and p.m. $15/day)

1. Child's name _____ Grade_____ Birthday_____

2. Child's name _____Grade_____ Birthday _____

3. Child's name _____Grade_____ Birthday _____

Mother's name_____
Address _____
Street City State Zip

Phone _____ (home) Business phone_____
Area code & number Area code & number
Cell Phone _____
Area code & number
Father's name _____
Address_____
Street City State Zip

Phone _____ (home) Business phone_____
Area code & number Area code & number
Cell Phone _____
Area code & number

Parents status: Married _____ Divorced _____ Separated _____

Emergency Information:

Persons authorized to pick up child(ren) enrolled other than parents:

Name _____ Home Phone_____ Cell _____

Name _____ Home Phone_____ Cell _____

Please list any allergies, disabilities, restrictions or special needs that your child may have:

_____

Child's Doctor _____ Office Phone_____

Hospital Preference_____

I agree that the staff may authorize a physician to provide emergency care in the event that I cannot be contacted immediately.

Signature:_____ Date:_____