



**GRADES  
K-5**

## 2026-27 Extended Day Registration

**Father/Guardian Information:** Name \_\_\_\_\_

Cell Phone \_\_\_\_\_ Best Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Mother/Guardian Information:** Name \_\_\_\_\_

Cell Phone \_\_\_\_\_ Best Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Child's Name (Last, First, MI):** \_\_\_\_\_ Grade: \_\_\_\_\_ DOB: \_\_\_\_\_

Child Resides with: ☐ Both Parents ☐ Father ☐ Mother ☐ Other \_\_\_\_\_ Gender \_\_\_\_\_

**Child's Name (Last, First, MI):** \_\_\_\_\_ Grade: \_\_\_\_\_ DOB: \_\_\_\_\_

Child Resides with: ☐ Both Parents ☐ Father ☐ Mother ☐ Other \_\_\_\_\_ Gender \_\_\_\_\_

**Child's Name (Last, First, MI):** \_\_\_\_\_ Grade: \_\_\_\_\_ DOB: \_\_\_\_\_

Child Resides with: ☐ Both Parents ☐ Father ☐ Mother ☐ Other \_\_\_\_\_ Gender \_\_\_\_\_

### Additional Individuals Authorized To Pick Up Your Child/ren:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Health concerns or Any other information you would like to share:

**Grade K-5 Extended Day is available on school days until 6:00 p.m.**

**Indicate the days your child will attend and if they will take the bus home or be picked up by a parent.**

**Registration Fee** \$40  
**Activity Fee** \$10  
**Standard Contract** \$17/Day  
**Variable Contract** \$20/Day  
**Drop-In Contract** \$25/Day  
**\*Snack will be provided**

	Mon	Tue	Wed	Thu	Fri	Drop-In
Child's Name						
Child's Name						
Child's Name						

Signature of person responsible for payments

Date