



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						