

Preschool Summer Care Registration

Please complete this Registration Form and the Financial Agreement. \$65.00 Non-refundable Summer Enrollment Fee to accompany this form.

For Office Use: Date rec'd: _____

Time rec'd: _____

EF Paid: _____

Student's Last Name _____ First _____ Middle _____

Home Address _____

Street Address

City

Zip Code

Birthdate _____ Age as of June 1st _____ Gender (circle one) M F

Please list any Food Allergies caregivers should know about _____

Symptoms _____ Does this require an Epi-Pen? _____ If the answer is yes, one will need to be supplied to us before the first day.

Does your child have Asthma? _____ Does this require an inhaler? _____ If the answer is yes, one will need to be supplied to us before the first day.

Parent's Status Married Separated Divorced Single Parent Other _____

Student Lives With Both Parents One Parent Joint Custody Parent & Step Parent Other _____

Names and ages of other siblings living in the home _____

MOTHER'S First Name _____

Last Name _____

Occupation _____

Employer _____

Cell Phone _____

Work Phone _____

Home Phone _____

E-mail Address _____

FATHER'S First Name _____

Last Name _____

Occupation _____

Employer _____

Cell Phone _____

Work Phone _____

Home Phone _____

E-mail Address _____

EMERGENCY CONTACT Name _____ Cell _____

Summer billing and payment is done weekly or monthly. You may pay by cash, check, or debit card. If you pay by check, please put in the payment box, or make cash or debit payments in the main office. Credit cards may also be used for payments over \$100. All checks returned by the bank will result in a \$35 fee. Balances not paid by August 2nd will incur a \$35 late fee. See Mrs. O'Halloran in the church office with any payment questions. You must have a zero balance before school starts on August 2nd.

Each week, we will have a special activity. There is a separate cost for these activities that must be paid in advance. We will collect the money the week before each activity. Please help us by remembering to turn in your money the week before. Children must arrive by 8:45am due to staffing schedules. Please notify your child's teacher if they have scheduled appointments. If arriving later than **8:45am**, you might not be able to participate in the special activities.

Please initial below acknowledging you have read and agree to the following:

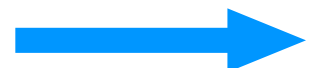
_____ I have read the policies and agree to pay all charges incurred at Grace Lutheran Child Care.

_____ I give permission for my child to participate in the weekly activities as outlined in the summer brochure.

_____ I give permission for the staff to reapply sunscreen (that I provide) throughout the summer.

_____ I have completed the back page for planned days of attendance.

Parent Signature _____ Date _____



Daily Fees

Morning (8:30am - 11:30am)	Half Day (7:00am - 12:30pm)	Full Day (7:00am - 6:00pm)
\$30	\$35	\$40

Credit will not be given for illness or no-shows. Because staffing is determined by enrollment, you will be billed for the days checked. Please the program (Morning, Half Day or Full Day) on the days you wish to attend. You will be billed for the days you choose below. **We are closed July 4th. August 1st is a noon dismissal day.**

	Monday	Tuesday	Wednesday	Thursday	Friday	Weekly Total	Monthly Total
June	2 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	3 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	4 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	5 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	6 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day		First Billing Period Total ↓
	9 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Water Day 10 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Movie 11 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	12 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	13 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day		
	16 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Water Day 17 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Sky Zone 18 \$20.00 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	19 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	20 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day		
	23 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Water Day 24 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	25 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	26 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	27 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day		
July	6/30 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Water Day 1 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Hot Dog Lunch 2 \$ 5.00 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	3 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	4 Holiday Closed		Second Billing Period Total ↓
	7 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Water Day 8 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Game Day 9 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	10 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	11 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day		
	14 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Water Day 15 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Yogurt Mill 16 \$5.00 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	17 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	18 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day		
	21 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Water Day 22 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	23 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	24 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	25 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day		
	28 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	29 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Bike Day 30 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	31 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day <input type="checkbox"/> Full Day	Ice cream 1 <input type="checkbox"/> Morning <input type="checkbox"/> Half Day		