

Before and After-School Care Registration Form

Child's Name Grade

Child's Name Grade

Child's Name Grade

Child's Name Grade

Parent or Guardian's Name

Father's Home Address Home Telephone Cell Phone #

Mother's Home Address Home Telephone Cell Phone#

Father's Employer Business Address Business Phone#

Mother's Employer Business Address Business Phone#

Attached is my non-refundable registration check.
_____ \$7 per child for morning care program
_____ \$12 per child for after-school program
_____ \$19 per child for both programs

Make registration fee payable to St. Aloysius School
(Don't combine with other payments.)

Parent or Guardian Signature Date