

**Saint Thomas More "Kids Time" After-School Program Registration Form**

Yes, I would like to enroll my child (ren) in the after-school program at St. Thomas More School. I have read the rules of the program and understand that if I or my child do not follow them, my child will be excused from the program. Furthermore, I agree to pay for any damages caused by my child during the course of this program.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Please Print:

Parent's/Guardian's Name(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Mother's work \_\_\_\_\_ Father's work \_\_\_\_\_

Pager/Cell # \_\_\_\_\_ Pager/Cell # \_\_\_\_\_

Authorized Persons to Pick-up your child (ren):

#1 Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

#2 Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

#3 Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact/s:

#1 Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

#2 Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Indicate your most frequent used billing rate:

\_\_\_\_ Drop-in      \_\_\_\_ Weekly      \_\_\_\_ Monthly

Please fill in the information below for each child that you are enrolling in our program: "Days" refers to the days that your child is scheduled to attend our program. If your schedule constantly changes, write "vary" on this line. "Time" refers to the time you plan to pick up your child from the program. If this time will change, write "vary" on this line. If your days and times vary; explain how you plan to use our service on the back of this form.

Child's Name	Days	Time	Age	Grade	Teacher
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For Office Use Only:      Date Received \_\_\_\_\_ Supply Fee Paid \_\_\_\_\_