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 _____