



# Registration

Child's Last Name		Child's First Name		Grade August 2010	
Primary Parent's Name			Additional Parent's Name		
Telephone 1:		Telephone 2:	Telephone 1:		Telephone 2:
Emergency Contact Person:			Child's Previous School		
Telephone 1:		Telephone 2:	Allergies/Health Concerns		
	<b>Attending</b>	<b>Not Attending</b>	<b>Before Care</b>	<b>After Care</b>	<i>Please place a 1 in your first track choice, and a 2 in your second choice.</i> <input type="checkbox"/> <b>Track 1</b> <input type="checkbox"/> <b>Track 2</b> <input type="checkbox"/> <b>Track 3</b> <input type="checkbox"/> <b>Track 4</b> <input type="checkbox"/> <b>Track 5</b>
<b>Week One</b> June 14—18					
<b>Week Two</b> June 21—25					
<b>Week Three</b> June 28—July 2					

<b>Costs</b>	
Number of weeks attending .....	_____
Cost per week .....	x \$ _____
[ ] \$110 if registered by April 19	
[ ] \$125 if registered after April 19	
[ ] \$5 per week for Before Care	
[ ] \$30 per week for After Care	
Total Cost .....	\$ _____
<i>\$45 nonrefundable registration fee is due with this application and counts towards your total fee. Payment in full is due by June 7.</i>	

Parent Signature
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<b>PPA Use Only</b>	
Date Received:	
Payment 1:	
Payment 2:	
Payment 3:	