

St. Bridget School **Extended Day Program**Serving St. Bridget School students in Grades Pre-K through 8

School Age Registration Form 20__ - 20__

Child's Name			·	
Las	t	First		Middle
Address				
Stre	eet		Town	Zip
Telephone		Emergency Phone		
Ag	ge Birth Date	(Grade	
	th: Both Parents lease list name and relation			
Las		First		Middle
	Information: Email			
Cell/Work Phone				
Mother				
Las	t	First		Maiden Name
Mother's Contact	Information: Email			
Cell/Work Phone				
Please list the ind	lividuals who may pick up y	our child from the Ext	ended Day Program	
Name		Relatio	onship to child	

Address		Phone
Name		to child
Address		Phone
Please list the individuals we may contact in case of	an emergency if we	e are unable to contact you:
Name		Contact Info
Address		
Name		Contact Info
Address		
Child's Physician		Contact Info
USAGE	MONTHLY PRICE	CHECK ONE
AM/PM FULL TIME	\$350.00	
AM/PM PART TIME (12 DAYS)	\$250.00	
AM/PM FULL TIME (7:30 DROP OFF 4:30 PICK UP)		
AM ONLY (7:30) OR PM ONLY (4:30)	\$130.00	
AM ONLY	\$175.00	
PM ONLY	\$175.00	
 10% Discount for siblings (discount applies to \$18.00 Drop-in rate (no sibling discount) \$5.00 late pick-up fee per child (15 minutes to Change of usage must be in writing by the 15 lagree to abide by all the rules and regulations of the St. Brid fees are collected separately from my tuition payments, and 	after the scheduled 5 th of the prior mon dget School Extended D	pick-up time) th and submitted to the Main Office. ay Program. I understand that Extended Da
15 th of the month, starting on August 20 th and ending on May another month; it is a use it or lose it policy.		
Parent Signature:		
Date:		