



**2019-2020
EXTENDED DAY & AFTERCARE REGISTRATION
ROSEBUD GARDEN & KINDERGARTEN-GRADE 6**

The after-school **Extended Day for Rosebud and Aftercare for Kindergarten through Sixth Grade** is intended for the use of parents who need care for their children beyond the school day. These programs require pre-registration. An exception for emergencies or unusual circumstances that prevent a parent from arriving by 3:15 pm for pick-up is allowed, however, parents must please notify the office so that staff is prepared for your child.

Please send a healthy snack for your child. Snacks are not provided by the Extended Day and Aftercare programs.

Aftercare Day Program Fees

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| School Days: 3 – 5pm | Rosebud Garden | \$9 per hour; \$5 per hour for subsequent children |
| School Days: 3:15 – 5:30 pm | Kindergarten-Grade 6 | \$9 per hour; \$5 per hour for subsequent children |
| <ul style="list-style-type: none"> • A \$25 late fee will be charged for pickups after 5pm for Rosebud Garden or 5:30 pm for K-6. • Drop-ins for emergencies or any other reason will be billed a rate of \$15 per hour. | | |

All who are planning to have their children attend the Extended Day or Aftercare Program must fill out this registration form and return it to the Business Office.

Please complete a separate form for each child attending.

Student Name: _____ Grade: _____

Please enroll my child in the Extended Day/ Aftercare Program on the following days:

| | | | | | |
|--------------------------------------|--|-----------------------------------|-------------------------------------|------------------------------------|----------------------------------|
| <input type="checkbox"/> Five Days: | <input type="checkbox"/> Monday through Friday | | | | |
| <input type="checkbox"/> Four Days: | <input type="checkbox"/> Mondays | <input type="checkbox"/> Tuesdays | <input type="checkbox"/> Wednesdays | <input type="checkbox"/> Thursdays | <input type="checkbox"/> Fridays |
| <input type="checkbox"/> Three Days: | <input type="checkbox"/> Mondays | <input type="checkbox"/> Tuesdays | <input type="checkbox"/> Wednesdays | <input type="checkbox"/> Thursdays | <input type="checkbox"/> Fridays |
| <input type="checkbox"/> Two Days: | <input type="checkbox"/> Mondays | <input type="checkbox"/> Tuesdays | <input type="checkbox"/> Wednesdays | <input type="checkbox"/> Thursdays | <input type="checkbox"/> Fridays |
| <input type="checkbox"/> One Day: | <input type="checkbox"/> Mondays | <input type="checkbox"/> Tuesdays | <input type="checkbox"/> Wednesdays | <input type="checkbox"/> Thursdays | <input type="checkbox"/> Fridays |

Parent One's Name and Telephone Number(s) during the school day:

Parent Two's Name and Telephone Number(s) during the school day:

Names and Telephone Number(s) of all adults authorized to pick up student:

Please describe any allergies or additional medical conditions that we should be aware of in order to best care for your child. _____