



Enrichment Registration Form

This form Must be competed for **each session** and returned to school with payment attached - either cash or money order. **Please complete one registration form for each enrichment.** We will only accept payments for current sessions – payments for future sessions is not permitted.

Session #: _____

Enrichment Program: _____ Day: _____ \$ _____

Student Name: Last _____ First _____

Homeroom Teacher: _____ Grade: _____ Age: _____

Is the student: In After Care? ____ yes ____ no

Picked up by an outside Transportation Service? ____ yes ____ no Who? _____

Family Information-Parent/Guardian

Last Name: _____ First Name: _____

Email: _____ Phone: _____

Emergency Contact Name (other than listed above): _____

Relationship to Student: _____ Phone: _____

Allergies / pertinent information regarding student: _____

Guidelines:

- Parents with outstanding balances cannot register a child until the balance is paid in full.
- Enrichment programs are non-refundable, except for hospitalization or the cancellation of a program.
- Students must be picked up promptly at the end of the enrichment. Students who are not picked up on time will be assessed a late pick-up fee.

I have read the program procedures and agree to the above guidelines.

Parent Signature: _____ Date: _____

Do not write below this line: SOA use only:

Amount Received: \$ _____ (✓ one) _____ Cash _____ M.O. # _____

Received by: _____ Date: _____