

Saint James School Extended Day Program
Registration Form 2023-2024

Children's Names

Grades

Address: _____
Street Town Zip Code

Parent's/Guardian's Name

Daytime Contact Number

Cell Phone Number

E mail

Please indicate whether you will be using the Extended Day Program full-time or part-time:

Full Time: Yearly Rate \$3,775.00 one child \$7,172.50 two children \$10,570.00 3 children

Please indicate whether you will be using the program mornings, afternoons, or both:

☐ Mornings

☐ Afternoons

☐ Both

Part Time: Hourly Rate \$11.50 one child \$21.85 two children \$32.20 3 children

Please indicate what days and times you plan to use the Extended Day Program:

<u>Day</u>	<u>Mornings</u>	<u>Afternoons</u>
Monday		
Tuesday		
Wednesday		Occasional use
Thursday		
Friday		

Person Responsible for Payment: This would be the person who holds the FACTS account, if a different person will be responsible please contact Mrs. Mayo at dmayo@saintjameschool.net.

Print Name: _____ Relationship to student(s): _____

Address: _____

Home Phone: _____

Work/Cell Phone: _____

Email: _____

Signed: _____ Date: _____

(Person responsible for payment)

PLEASE COMPLETE AND RETURN THIS FORM TO THE SCHOOL OFFICE
IF YOU PLAN TO PARTICIPATE IN THE EXTENDED DAY PROGRAM.