

Extended Enrichment

After-school Care Registration Form 2023/2024

Kindergarten—5th Grade

Student's Name: _____ Grade in 23/24: _____ Program Start Date: _____

Teacher's Name (if known): _____ Parent/Guardian Name: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email address: _____ Are you a current Grace/Cascade Employee: Yes No

EE: After-school Care Reservation Worksheet

Please indicate the sessions and days you are requesting **After-school Care** for your child by placing an "X" in the appropriate boxes.

Fees are assessed per session Each session is \$17.00

Sessions	\$17 Per Session	Monday	Tuesday	Wednesday	Thursday	Friday
After-school Care K-2nd: 2:30-6:00pm 3rd-5th: 2:45-6:00pm						

I intend to register my child for the days indicated in the Reservation Chart for the 2023/2024 school year. I understand that the rate of \$17.00 per session will be due on the FIRST of each month; September through June. If my payment is not received by the 10th of each month, a late fee will be applied to my account for the following month. Failure to settle accounts in a timely manner may result in the removal of my child from the program.

I also acknowledge that any changes to my child's schedule must be made by the 20th of the month prior to the start of the new schedule in order for my bill to be adjusted.

Parent Signature: _____

Date: _____

Read Extended Enrichment Handbook

Signed Enrollment Authorization

*** Complete the form, then save and email as an attachment**



extendedenrichment@gracechristian.org



541-858-7260

