

**SEASIDE ELEMENTARY STINGRAY CLUB
2018-2019 REGISTRATION
AFTER SCHOOL CHILD CARE PROGRAM**

Student's Name _____ DOB _____
Last First

Parent/Guardian 1 _____ Parent/Guardian 2 _____

Home Address _____
Street

City Zip

Mailing Address _____
Street

City Zip

Phone Numbers

Home	Parent/Guardian 1 Work	Parent/Guardian 1 Cell	Parent/Guardian 2 Work	Parent/Guardian 2 Cell	

Emergency Contact _____
Name Number

Statement of parent:

- _____ My child will attend the Stingray Club After School Program for the 2017-2018 year.
 _____ I would like for my child to complete most of his/her homework during Stingray Club.

Parent/Guardian Signature _____

Sibling's Names _____

Fee Schedule:

A Non-refundable \$25.00 registration fee per child must accompany this form in order for your child to be registered for the 2018-2019 Stingray Club. Please note that enrollment may be limited and registration must be paid to reserve enrollment.

Weekly fees are \$40.00 per child. Fees are due on Thursday prior to the week of attendance. If you have more than one child enrolled in the Stingray Club, all additional children (siblings) will receive a \$5.00 reduction in weekly fee (\$35.00 per week per child).

The registration and first week's tuition(Aug. 22-24) must be paid by Friday, August 17 in order for students to attend Stingray Club the first week of school. Payment for Aug. 27-31 will be payable on Aug. 23.

The Stingray Club is open each school day from 2:30-6:00 PM daily. The program will not run on days when students are not in school or on early dismissal days.

PLEASE COMPLETE PICK UP INFORMATION ON BACK.

Student Name _____

My student may be released from Stingray Club to the care of the following individuals who are not listed on the registration form as Parent/Guardian:

Name _____ Phone Number _____

Name _____ Phone Number _____

Name _____ Phone Number _____

Name _____ Phone Number _____

Name _____ Phone Number _____

Parent/Guardian Signature _____