

Before and after school care registration

IF YOU INTEND TO ONLY USE THE HALF DAYS OPTION, YOU DO NOT NEED TO PAY THE REGISTRATION FEE.

Contact Information:

Parent Name _____ Phone # _____

Address _____ City _____ Zip _____

E-mail _____

List the students who would be participating in before and/or after school care below:

<u>Student's Name</u>	<u>Grade (2018-2019)</u>	<u>Age now</u>
_____	K 1 2 3 4 5 6	_____
_____	K 1 2 3 4 5 6	_____
_____	K 1 2 3 4 5 6	_____
_____	K 1 2 3 4 5 6	_____
_____	K 1 2 3 4 5 6	_____

Select the plan you intend to utilize in the program:

- A) 0-6 hours/week \$34
 B) 6-10 hours/week \$55
 C) 10-15 hours/week \$74
 D) 15-20 hours/week \$100

**Plans based on need for one child. We will work out a customized plan for families with multiple children participating.*

Mark the days and sessions you intend to utilize in the program:

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
BEFORE SCHOOL					
AFTER SCHOOL					

Return registration form and \$50 (non-refundable) to the elementary office or mail to:

Make checks payable to Centreville Public Schools.

Centreville Public Schools
 Before & After School Care
 PO Box 158
 Centreville, MI 49032