

# St. Jude Thaddeus Catholic School

## Registration Form

### Contact Form

STUDENT'S FIRST NAME

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LAST NAME OF CHILD

HEALTH ISSUES/ALLERGIES

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CONTACT INFORMATION OF PRIMARY GUARDIAN(S)

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Employer: \_\_\_\_\_

Phone: \_\_\_\_\_

CONTACT INFORMATION OF OTHER GUARDIAN(S)

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Employer: \_\_\_\_\_

Phone: \_\_\_\_\_

INDIVIDUALS AUTHORIZED TO PICK UP CHILD(REN)

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

(If you are using extended care, please read, sign & date the other side) →



# Parent Agreement For Extended Care

## THE PARENT AGREES TO:

- ❖ Children must be toilet trained. Diapers and pull ups not allowed
- ❖ Payments are due by the 15<sup>th</sup> day of each month. Extended care fee is \$5.00 per hour/child. If your child is enrolled full time in both extended care and preschool the daily rate is \$35.00 (with no additional preschool-pre-k cost.) Late payments will be charged a late fee of \$25.00 per month.
- ❖ Provide a weather appropriate change of clothing for my child in case of spills or playground accidents.
- ❖ Provide a refillable water bottle with my child's name on it or a sippy cup if your child prefers.
- ❖ Provide a sack lunch for my child if they do not want to eat a hot lunch. Hot lunch is available through our school at a cost of \$2.50/meal, which will be added to your monthly bill.
- ❖ Inform the provider/school of any change in address or telephone numbers.
- ❖ Pay for any emergency medical treatment for illness or injury occurring while the child is in our care.
- ❖ Inform the provider if someone other than the parent will pick up the child or they will not be released. You may call extended care personnel or the main office.
- ❖ When child gets sick, keep child home until they are symptom free for at least 24 hours. (Fever over 100.4, diarrhea, vomiting.)

## THE DAYCARE PROVIDER AGREES TO:

- ❖ Give the child loving care, constant supervision and pleasant and stimulating things to do.
- ❖ Provide mid-morning snack and mid-afternoon snack.
- ❖ Call 911 first if emergency medical care is needed for the child and then notify the parents.
- ❖ Use appropriate methods of discipline. We do not use corporal punishment or shaming.
- ❖ Provide a setting which allows time and materials for creative play and outdoor play (weather permitting.) Please provide appropriate clothing for weather (i.e. hats, gloves, boots, & coats)
- ❖ Have a rest time daily. This may change as we have a school setting which provides us with extracurricular activities such as plays, assemblies etc.

PARENTAL OR GUARDIAN SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

