



MOTHER OF OUR REDEEMER CATHOLIC SCHOOL

After Care Application 2017 - 2018

Section I Student-Parent Information

_____ Will attend

_____ Will not attend

Date: _____

Student's Name: _____ Grade: _____

Birth Date: _____ Gender: _____

Address: _____ City: _____

Home Telephone: _____ Work Telephone: _____

Mother Name: _____ Cell: _____

Father Name: _____ Cell: _____

Guardian: _____ Cell: _____

Section II Emergency Contact Information

In case parent/guardian can not be reached, please contact:

A. Relationship _____ Telephone Number: _____

B. Relationship _____ Telephone Number: _____

C. Physician's Name _____ Telephone Number: _____

Only if applicable, complete the following:

A. My Child has the following medical Problem: _____

B. My Child takes the following medication regularly: _____

C. My Child has the following Allergies: _____

I authorize medical treatment for my child in case of accident or illness while on campus

Signature or Parent/Guardian: _____ Date: _____

Section III Authorization for Release of student from School

List below those persons authorized to take your child from school during the school day. If any person is **NOT AUTHORIZED** to take student from school, please indicate:

PLEASE BE SURE TO NAME EACH PERSON INDIVIDUALLY

Authorized: _____

Not Authorized: _____

Parent/Guardian Signature: _____ Date: _____

Mother of Our Redeemer Catholic School After Care Program

After-School Program for 2017-2018 school year will begin on August 21, 2017. The fees for the Extended Care must be paid in monthly installments. **FEES CAN NOT BE PAID ON A WEEKLY BASIS OR AS YOU GO ALONG.** Credits will only be allowed when a written notice is provided a week in advance from when student (s) will not be attending the Extended Care. After-School fees schedule are the following:

Full Time Service until 6:00PM	\$ 50.00 per week
Part Time Service 2:00 PM to 4:00 PM	\$ 30.00 per week
Part Time Service 3:00 PM to 5:00 PM	\$ 30.00 per week
1 Hour of service the entire week (2:00 PM – 3:00 PM)	\$ 20.00 per week
1 Hour of service the entire week (3:00 PM – 4:00 PM)	\$ 20.00 per week
1 Day per week only	\$ 17.00 per week

If student is not picked up at the appropriate time (6:00 PM) a fee of \$ 5.00 (Revised 2017) per minute will be charged per student.

As a parent/guardian of the student being registered for the extended care services provided by Mother of Our Redeemer Catholic School, I and my child are aware of all school rules, policies and guidelines are applicable to while the student is at this additional service.

I am the parent/guardian of the student being registered for the extended care services provided by Mother of Our Redeemer Catholic School are aware of my responsibility to pick-up my student within the time frame designed for this service. I am aware if my child is not picked-up within the time an additional fee will be added to my account. In addition, upon second late pick-up Mother of Our Redeemer Catholic School will report to the proper authorities. Please Sign below stating that you have read above and agree on the payments as scheduled.

Child Name: _____

Parent/Guardian Name (Print): _____

Signature: _____ Date: _____