

FES Childcare Registration 2024-2025

Student Information:

if you have multiple students please list them all on this form:

Name	Age	Grade/Homeroom

Please Circle One:

Before Care Full Time

After Care Full Time

Before and After Care Full Time

Before Care Part Time

After Care Part Time

Before and After Care Part Time

Part Time Days: (Select Three Total)

Monday

Tuesday

Wednesday

Thursday

Friday

Student(s) Address:

Street Address

City

State

Zip Code

Parent/Guardian Information:

Name	Phone Number*	Email Address

***MUST be a number that can be answered during child care hours!**

Any Allergies or Physical Restrictions Child Care staff need to be aware of?

Child Care Staff Use Only

Registration Fee Paid

Date: _____

Approved Adults/Emergency Contacts

Name (Must match name on ID)	Phone Number - MUST be a number that can be answered during child care hours!

I have read and understand the following:

- Discipline Policy**
- Tuition and Fees**
- Tuition and Fee Schedule**

I have discussed the discipline policy with my student(s) and made them aware of the rules/guidelines. We understand that failure to follow the policies in place may result in my student(s) being removed from the child care program.

I understand the tuition and fee schedule and that it is my responsibility to pay tuition in a timely manner and email the director my receipt as proof of payment.

Parent Signature

Date