



2026-2027 Non-School Day Registration Form

~ All care provided at the Webster Learning Center, 2000 Lehigh Station Rd. ~

Student information:

Date: _____

Child's Name: (Last) _____ (First) _____ (Middle Initial) _____

Parent/Guardian Name: _____ School: _____ Grade: _____

Phone (Primary): _____ Email: _____

Currently registered for any C²Z program? ☐ Yes – Continue below ☐ No – Stop and submit an Enrollment Packet.

Registration Deadline listed below. Non-School Day Refunds issued only when request is made one week in advance.

Non-school day(s) needed:

Day(s) Needed	Date	Registration Deadline	Fee \$64/Day	\$10/day Late Fee^	Day Total
	November 2026 <i>Thanksgiving Week</i> (circle date(s) needed) Mon 23 Tue 24 Wed 25 # days: _____ x\$64	11/9/2026	\$	\$	\$
	December 2026 <i>Holiday Recess</i> (circle date(s) needed) Mon 28 Tue 29 Wed 30 # days: _____ x\$64	12/14/2026	\$	\$	\$
	Friday, January 29, 2027 <i>Grading Day</i>	1/15/2027	\$64*	\$	\$
	February 2027 <i>Winter Recess</i> (circle day(s) needed) Mon 15 Tue 16 Wed 17 Th 18 Fri 19 # days: _____ x\$64	2/1/2027	\$	\$	\$
	March 2027 <i>Spring Recess</i> (circle day(s) needed) Mon 22 Tue 23 Wed 24 Th 25 Fri 26 # days: _____ x\$64	3/8/2027	\$	\$	\$
	Friday, April 16, 2027 <i>Conference Day</i>	4/2/2027	\$64*	\$	\$
	Friday, May 28, 2027 <i>Memorial Day Recess</i>	5/14/2027	\$64*	\$	\$

*Less fee paid for wrap-around enrollment that day.

^Per Day Late fee charged if registration is submitted after that day's registration deadline.

TOTAL: \$

Parent/Guardian Signature: _____

Date: _____

Method of Payment: ☐ Visa ☐ MasterCard ☐ Check (# _____) ☐ Cash (rcpt # _____)

If you are paying with Visa or MasterCard and did not already sign a Credit Card Authorization form, complete the following:

Credit Card #:

Expiration Date (MM/YY): CVC# (from back of card):

Print Card Holder Name: _____

Billing Address on Account: _____

Card Holder Signature: _____

Revised 8/31/2026