ASC Registration Form 2022-2023 – <u>one per child</u> – print clearly, please

_____ _____ _____ _____

Child's FULL Name Date of Birth Gr in SEPT 2022 Care Card #

Name of the Family Doctor and Daytime phone number

Family Information

<u>Mother's</u> Name_____ Daytime Phone _____

Work Phone _____Cell Phone _____

Email: _____

<u>Father's</u> Name_____ Daytime Phone _____

Work Phone _____Cell Phone _____

Email: _____

EMERGENCY CONTACT (other than parents) and PHONE during the day

_____ _____

Name – print clearly Phone

<u>If a newly enrolling family</u>, I/we have received, read, and agree to the Philosophy statement, rules and guidelines for our After School Club, and have initialed and signed all appropriate forms. _____ (please initial)

<u>All parents</u>: I agree to maintain my financial obligations to the ASC as outlined in the Fee Statement.

_____ _____

Family Name – print and Signature required Date