

Student Information:

Southside Christian School

Before/After-School Care Program 2024-2025 *Registration Form*

When: Monday - Friday

Where: Southside Christian School

Time: 3:00 - 6:00 PM

Annual Registration Fee: \$50

Student Name(s):					Tod	lay's Date:	
Male	Female	DOB:	Age:	Grade:	Teacher:		
Medica	l conditions	/Allergies:					
Family	Informatio	on:					
Mother	:			Home Phone:		Cell:	
Father:		· · · · · · · · · · · · · · · · · · ·		Home Phone:		Cell:	
Other:_				Home Phone:		Cell:	
Primary	/ E-mail:					·····	
Emerge	ency Conta	cts and Author	ized Release	Information:			
The foll	lowing peop	le have our peri	nission to pic	ck up our child fron	n After-School C	are in our absence:	
Name:_				Relationship:			
Home F	Phone:			Cell Phone:			

Name: Relationship:

Home Phone: Cell Phone:

See reverse side

**Any student that does not choose an Aftercare billing plan
will be charged the Drop In rate**

Beforecare/Aftercare Payment Information – 2024-2025 School Year

> FEES ARE PER STUDENT:

	PICK-UP BY	PICK-UP BY	DROP – IN
BEFORECARE	4:00 P.M.	6:00 P.M.	1-2 DAYS PER WEEK
\$5 PER DAY	\$35/WK	\$60/WK	PICK-UP BY 4
\$3 PER DA I	\$33/WK		P.M. @ \$15/DAY
			PICK-UP BY 6
			P.M. @ \$25/DAY

PLEASE NOTE: Due to the undue burden it places on the staff, a \$1 per minute late fee will be assessed for students picked up after 6:00 p.m.

BILLING SCHEDULE: BEFORE/AFTER CARE WILL BE BILLED AND PAID THROUGH FACTS FOR BOTH WEEKLY AND DROP IN CARE.

Due Date	Month of Service
Sept 20, 2024	August
Oct 20, 2024	September
Nov 20, 2024	October
Dec 20, 2024	November
Jan 20, 2025	December

Due Date	Month of Service
Feb 20, 2025	January
Mar 20, 2025	February
Apr 20, 2025	March
May 20, 2025	April
June 20, 2025	May

Step 1: Please initial Service Plan			
	OPTION 1:	Pick-up by 4:00 p.m \$35 per week Pick-up by 6:00 p.m \$60 per week	
	OPTION 3:	Drop In – for 1 or 2 days per week - Pick-up by 4:00 p.m. @ \$15 per day/Pick-up by 6:00 p.m. @ \$25 per day	
I understand that Before/After-School Care fees will be due on the 20th of the month following the month of service according to the fee schedule on the reverse side. I have read and understand the Before/After-School Care guidelines as written in the Before/After-School Care Program section of the Student Handbook. I agree to pick up my child no later than 6:00 p.m.			
Signature of Parent	/Guardian	Date	

Please complete and return to the main office