

## Edgerton Public After School Program Sign Up

This form, along with payment must be returned to Edgerton Public School before the first of each month. If payment is not received, your child will be unable to attend the program until payment is made.

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Parents' Name: \_\_\_\_\_

Contact #(s) during ASP hours: \_\_\_\_\_

Persons authorized to pick up my child(ren): \_\_\_\_\_

Allergies After School Staff should be aware of: \_\_\_\_\_

*(Students will be served snack daily)*

**Please indicate with an "X", which days your child will attend the After School Program**

Week	Monday	Tuesday	Wednesday	Thursday
Jan 2-3	X	X		
Jan 7-10				
Jan 14-17				
Jan 22-24	X			
Jan 28-31				

Amount Enclosed: \_\_\_\_\_

**RATES**

\$50/month

\$15/week

\$4/day

\$10 Drop in rate (Drop in rate is for any unscheduled day.)

**Additional Children**

\$40/month 2<sup>nd</sup> child

\$30/month 3<sup>rd</sup> child and each additional child

**LATE FEE: \$1 will be charged for every minute past 5 p.m. the child is not picked up.**