

**Homework Wrap Around Club
Registration**

(All sections of this form must be completed and submitted with payment of \$100 which will be applied to total fee.)

First Child:

Child's Name _____ Grade _____ Male _____ Female _____

Please note any allergies _____

Second Child:

Child's Name _____ Grade _____ Male _____ Female _____

Please note any allergies _____

Parent /Guardian Information

Name _____

Home address _____ City _____ Zip _____

Employer _____

Address _____

Work Phone _____ Home Phone _____ Cell Phone _____

Emergency Contact Person:

(other than parent-must be 18 years old-must show identification)

1. Name _____ Relationship _____

Home address _____ City _____ State _____ Zip _____

Work Phone _____ Home Phone _____ Cell Phone _____

2. Name _____ Relationship _____

Home address _____ City _____ State _____ Zip _____

Work Phone _____ Home Phone _____ Cell Phone _____

* Payment for After School Wrap Around Care must be paid prior to or at the time services are rendered. The fee for the year is \$1,400 and may be paid in 10 monthly payments of \$140.00.

*After Care is from 3:00 p.m. to 5:45 p.m. An additional fee will be assessed for picking up students late (\$5 may be charged for every 15 minutes past regular pick-up time). There will be NO After Care on days with a noon dismissal.

* Checks to be made payable to: Baptist Regional School and noted: After School Wrap Around Care. Mail registration and check to: Baptist Regional School, 300 Station Ave., Haddon Heights, NJ 08035, or send into the school office.

* Participation in the After School Wrap Around Care is open to students in grades K to 6th grade.

• All students must be signed out with program personnel at pick-up time.

Signature _____ **Date** _____