



WASHINGTON MONTESSORI
Before and After School Program
Application 2018-19

Office Use Only

Received by: _____

Date Received: _____ Time _____

Payment Received Cash Check # _____

- Regular Attendee: Student attends on a weekly basis**
- Drop in Only: Student attends no more than 3 days per month**
- My child is a High School Student and will attend the program for a \$50 annual fee**

Before-School Care 7:30 - 8:00 am		<u>No Charge</u>
Please <input type="radio"/>	Individual Child	
check one <input type="radio"/>	Family # of children: _____	
After-School Care 3:00 - 6:00 pm		
Please <input type="radio"/>	Individual Child	\$15/day, \$12.00 per additional child
check one <input type="radio"/>	Family # of children: _____	\$40/week, \$30.00 per additional child

Registration Fee: \$25.00 per family <i>(one time fee the first year enrolled in program)</i>	<input type="radio"/> Paid \$ _____
Supply Fee: \$35.00 per child <i>(Supply fee for Regular Attendance Only)</i>	<input type="radio"/> Paid \$35 X _____ # of Children = \$ _____

Student's Name(s): _____ **Grade:** _____ **Teacher:** _____

Allergies/Medical Conditions _____

Parent's/Guardian's Name(s)	
<i>Last</i> _____	<i>First</i> _____
Daytime Phone # _____	Cell Phone# _____
<i>Last</i> _____	<i>First</i> _____
Daytime Phone # _____	Cell Phone# _____

Person to notify in case of emergency (if you cannot be contacted)	
<i>Last</i> _____	<i>First</i> _____
Daytime Phone # _____	Cell Phone# _____

It is critical that you keep us posted of any changes AND that the information you provide is accurate for the time period your child is in our care!

BASC Program Child Pick Up List

People other than parent(s)/guardian(s) and emergency contact listed on front of application who are permitted to pick up child(ren) from the After School Care Program.

(Please indicate if this list is different for each child or if all people listed below are permitted to pick-up all children listed on the front of this application.)

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

7 _____

8 _____

9 _____

10 _____

11 _____

12 _____

Signature of Parent/Guardian: _____