

**Old St. Mary's School  
Extended Day Registration Form 2008-2009**

Family Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mother's First Name: \_\_\_\_\_ Fathers First Name: \_\_\_\_\_

Occupation/Job Title: \_\_\_\_\_ Occupation/Job Title: \_\_\_\_\_

Place of Work: \_\_\_\_\_ Place of Work: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Emergency Contacts**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

<b>Child's Name</b>	<b>Grade</b>	<b>Allergies or Special Information</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

The Extended Day Program is in operation from 7:30AM-8:30AM before school, and from 2:30PM-5:30PM after school. The charge is \$7.00 an hour per child.

Any special concerns or needs your child may have that we need to be aware of:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(over)

