## Maranatha Christian Schools

## Extended Care Registration

## May 29th - June 15th (Open for 3 weeks)

## 2018 Registration Form

Please fill out information below and write down any allergies or asthma your child may have. All payments must be prepaid or paid at PICK UP. Hours of operation are 8:00am to 5:00pm in room C110A. Late charges will be applied \$2.00 per min per child for every minute past 4:30pm.

Student Name:	Grade				
Address:			ne dans dans dans dans dans dans dans dans	~~~	
City:	Zíp Code:				
Home Ph#		Work Ph#			
Cell#	2nd Ce	#	. Aller		
E-mail:					
Signature of Parent / Guardi	an:	ne dine dine dine dine dine dine dine di	na 1804 1804 1804 1804 1804 1804 1804 1804	~~~	
TK- 6 <sup>th</sup> Grade -	Open at:	8:00am	1:30pm	(8.5 hours	
open)	·		·		
Hourly drop off is \$9.00 pe	r hour daily 8.5	hours		\$76.50 daily	
first Week rate is \$8.00 per hour per child (4 days) paid in full \$272.00					
(1wk.)	•	<b>5</b> 1			
Second Weekly rate is <b>\$8.00</b>	per hour (5 dau	us) paid in full		\$340.00 (1wk.)	
Two Weeks rate is discounted @\$7.00 per hour (9 days) paid in full \$535.50					
(2wks.)	<del>'</del>	<del></del>			
Full Third Week rate is \$7.00	per hour (14 da	aus) paid in full		\$833.00	
(3wks.)	, , , , , , , , , , , , , , , , , , , ,	9	-	<u> </u>	
*Sibling discount apply	to families with	3 or more stuc	lents in ou	r program	
Date:		Total A	mount		
Circle Method of Paymer					
Visa MasterCard Credit Card #			Cas	.h	
Exp. Date:		ígít Code	, , , , , ,		
Card Signature:					

Check if applies: Allergies	Asthma Epi	Bee Stings	Peanuts
Write down what your child's al	lergies or asthma?	s stall s	ting sting st

<u>All Payment</u> is required at pick up time, no exceptions. Please bring credit card, cash, or check when you are picking up your child every time. Any questions or concerns please contact Julie Elliott @ (858) 354-5727 or email: julie.elliott@maranathachristianschools.org