

Lee Christian School

Aftercare Registration Form

<u>Student's Name(s)</u>	<u>Grade</u>
1. _____	_____
2. _____	_____
3. _____	_____

Known allergies: _____

People authorized to pick my child up from aftercare. (Include yourself on the first line)

<u>Name</u>	<u>Relationship</u>	<u>Cell Number (required)</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

- I understand that my child must be signed out upon departure, by the person picking up the child.
- I understand that a late fee of \$1 per minute will be charged beginning at 6:00 pm.
- I agree that my child and I will uphold the policy and procedures of the LCS aftercare program.
- If my child's behavior seriously violates the safety of any child or staff, I understand that he/she may be removed from the program. In these circumstances, I agree that a parent or authorized adult will pick up my child within 30 minutes of notification.

Signature: _____ **Date:** _____