

SONSHINE STATION REGISTRATION 2019-2020

To enroll your child in any of the following programs, please complete the requested information, sign, date, and return to First Christian School. Please check the program(s) you wish to enroll your child in.

<p style="text-align: center;">Basic Information</p> <p>Child's Name: _____</p> <p>Age: ____ DOB: _____</p> <p>School the child attends: _____ Grade: _____</p> <p>Parents/Guardian's Name: _____</p> <p>Address: _____</p> <p>Phone Numbers: Home _____</p> <p>Cell _____ Work _____</p> <p>Email Address: _____</p> <p>Employer Name: _____</p> <p>Employer Address: _____</p> <p>Employer Phone Number: _____</p> <p>Anyone authorized other than a parent to pick up your child: _____</p> <p>Anyone unauthorized to pick up your child: _____</p>	<p style="text-align: center;">Contract and Payment</p> <p>____ I would like to pay weekly on the first day of the week.</p> <p>____ I would like to pay monthly.</p> <p>____ I would like to make other arrangements with the Director.</p> <p>Fees are due by the first day of the school week. A late fee of \$5.00 per week will be added if payment is not received by Wednesday of that week. By signing this agreement I am reserving a place for my child at SonShine Station for the school year of 2019 - 2020 and agreeing to be financially responsible for all payments. I understand that no credit will be given for days my child is absent unless there is an emergency situation. My child will no longer be allowed to attend if my balance due exceeds fifteen days. I agree to include the \$20.00 registration fee per child with my registration form.</p> <p>Parent/Guardian Signature _____</p> <p style="text-align: right;">Date _____</p> <p><input type="checkbox"/> I have made bus arrangements.</p> <p><input type="checkbox"/> I have included the \$20.00 registration fee per child (\$40.00 after 10/1).</p> <p><input type="checkbox"/> I have a current photo release form and emergency authorization form at SonShine Station.</p> <p><input type="checkbox"/> I need a photo release form and emergency authorization</p>
<p>____ Early Bird Before School Program</p> <ul style="list-style-type: none"> → Open from 6:45-8:05 A.M. → \$15.00 weekly fee per child* → \$8.00 one day fee per child <p>____ After School Program</p> <ul style="list-style-type: none"> → Open from 3:00-5:30 P.M. → \$30.00 weekly fee for First Christian School students → \$60.00 weekly fee for LaCrosse students* → \$50 weekly fee for Mecklenburg County Public Schools → \$5.00 discount for 2nd and 3rd child → \$12.00 one day daily fee per child → \$35.00 full day fee <p>*A minimum of five students must participate in the before and after school program from LaCrosse Elementary in order for this service to be offered. All county/private school buses must provide transportation which must be arranged by the parent/guardian of the child.</p> <p>I would like my child to have their homework done at SonShine Station with assistance from the staff.</p> <p>____ Yes ____ No</p>	<p style="text-align: center;">FOR OFFICE USE ONLY</p> <p><input type="checkbox"/> Registration <u>Paid</u> C# _____ Cash Online</p> <p><input type="checkbox"/> Confirmed Forms</p> <p><input type="checkbox"/> Confirmed Bus Arrangements</p> <p><input type="checkbox"/> Invoiced Account</p> <p><input type="checkbox"/> Confirmed Homework List</p> <p><input type="checkbox"/> Instant Alert</p> <p>Initials of person receiving: _____ Date: _____</p> <p>Director's Signature: _____</p> <p style="text-align: right;">Date _____</p>