



*For office use only*  
 Rec'd \$50 on: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Check #: \_\_\_\_\_  
 [ ] Cash [ ] Credit

## Extended Care Program - \$50/week

### 2019-2020 Registration Form

This form must be returned with the **required** \$50 registration fee no later than **August 7, 2019.**

Please make checks payable to Matthew Reardon Early Learning Academy.

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Toddler \_\_\_\_ Early Preschool \_\_\_\_ Preschool-3 \_\_\_\_ Pre-K4 \_\_\_\_

#### Emergency Contact Information/Pick-Up Permission:

Parent 1 Name: _____	Home: _____
Email: _____	Work: _____
	Cell: _____
Parent 2 Name: _____	Home: _____
Email: _____	Work: _____
	Cell: _____
Alternate Contact Name: _____	Home: _____
Relationship to Child: _____	Work: _____
	Cell: _____
Alternate Contact Name: _____	Home: _____
Relationship to Child: _____	Work: _____
	Cell: _____

Please indicate your **anticipated regular use** for Extended Care by checking the blocks below. If you are using After-Care, please indicate the time you expect to pick up your child (helps us plan staffing).

	Monday	Tuesday	Wednesday	Thursday	Friday
Before-Care (begins 7:30 a.m.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After-Care (ends 6:00 p.m.*)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\* An additional charge will be incurred for late pick-up; please see our Late Fee Policy for details.

Extended care cost is \$50/week regardless of how many hours a student attends. A minimum of 5 students must register for a class to be run. These programs operate on a first-come, first-served basis, and fill up quickly.

Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Return to: Matthew Reardon Early Learning Academy, P.O. Box 14669, Savannah, GA, 31416