



Saint Teresa of Calcutta Catholic School  
STC Crusaders CARES Program  
(An Extended Care Program)

To reserve a space for your child in the STC Crusaders CARES Program, please complete the information on this registration form along with a non-refundable fee of \$10 per family **payable to St. Teresa of Calcutta Catholic School**. **Please return your registration form and fee to the Saint Teresa of Calcutta Catholic School Business Office no later than Friday August 17th.** Your August payment is due on or before the first day of school, August 21st. Your September monthly payment is due on or before September 1st. Please see chart for rates and payment due date details.

CHILD(REN)S FIRST & LAST NAME

2018-2019 GRADE LEVEL

- |          |       |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |

PARENT/GUARDIAN'S NAME \_\_\_\_\_

NAMES of those AUTHORIZED to pick-up your child(ren) & their RELATIONSHIP

- |          |       |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |

I authorize and agree that those listed above my pick-up my child from the STC Crusaders CARES Program After School Care.

Parent/Guardian Signature: \_\_\_\_\_

**PLEASE COMPLETE INFORMATION ON REVERSE SIDE.**

Kindly indicate your enrollment plan choices below.

My child(ren) will attend After School Care (Please check one for each)

August:  8 days  7 days  6days  5 days  4 days  
 3 days  2 days  1 day

September through May:

5 days per week  4 days per week  3 days per week  
 2 days per week  1 day per week  Emergency/Occasional

I have read and agree to abide by the policies as stated in the St. Teresa of Calcutta Catholic School STC Crusaders CARES Program.

Parent/Guardian Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_