

"ON OUR WAY HOME"

After School Enrichment Program for grades K through 8
St. Peter School
35749 Center Ridge Rd.
North Ridgeville, OH 44039

FAMILY NAME: _____

NAME(S) OF CHILD(REN): _____

GRADE(S): _____

APPROXIMATE PICK UP TIME NO LATER THAN 6:00 PM: _____

PARENTS WHO COLLECT THEIR CHILDREN AFTER 6:00 PM WILL BE REQUIRED TO PAY A \$5.00 LATE FEE FOR EVERY 10 MINUTE INCREMENT BEYOND CLOSING.

PERSON(S) AUTHORIZED TO PICK UP CHILD(REN):

OTHER COMMENTS I SHOULD KNOW ABOUT THE CHILD(REN): (allergies, medications, other health conditions, etc.)

IN CASE OF EMERGENCY, PLEASE CONTACT: _____

NAME: _____

ADDRESS: _____

ALTERNATE PHONE: _____

PHONE: _____

PAYMENT FOR SERVICES

PAYMENTS ARE EXPECTED ON MONDAY FOR THE COMING WEEK. PAYMENT CAN BE MADE ON A BI-WEEKLY BASIS FOR THE FOLLOWING TWO WEEK PERIOD.

METHOD OF PAYMENT: **CASH**

CHECK MADE PAYABLE TO: **ON OUR WAY HOME**

DUE TO LIMITED ENROLLMENT WE CANNOT CONTINUE TO ACCEPT CHILDREN WHOSE FEES ARE NOT CURRENT

I HAVE READ AND UNDERSTAND THE TERMS SET FORTH IN THE ABOVE REGISTRATION FORM AND AGREE TO PROGRAM TERMS.

PARENT/GUARDIAN: _____