 EAGLES LANDING 2021-2022

Childs Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Morning Care: \_\_\_\_\_\_\_\_\_\_\_\_\_ Afternoon Care:\_\_\_\_\_\_\_\_\_\_\_

Childs Birthdate: \_\_\_/\_\_\_/\_\_\_\_\_\_ Grade: \_\_\_\_\_\_Sex: Male\_\_\_\_ Female\_\_\_

Mothers Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell:\_\_\_\_\_\_\_\_\_\_WK:\_\_\_\_\_\_\_\_

Mothers Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fathers Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell:\_\_\_\_\_\_\_\_\_\_WK:\_\_\_\_\_\_\_\_\_\_\_

Fathers Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child resides with: \_\_\_\_\_\_Mother\_\_\_\_\_\_Father\_\_\_\_\_Both\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Other

**MEDICAL CONTACT**

Childs Doctor: \_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May SWE call another Doctor if unable to contact the above? \_\_\_\_\_yes\_\_\_\_\_no

**CUSTODIAL RIGHTS: PARENTS PERMITTED TO REMOVE THE CHILD**

**Father**: \_\_\_\_YES/NO **Mother**: \_\_\_\_\_\_YES/NO  **Step-Parent**:\_\_\_\_YES/NO

If **NO,** custody papers on the **BIOLOGICAL/GUARDIAN PARENTS** must be on file in the school office to legally enforce.

**PERMITTED CHILD PICK UP/EMERGENCY CONTACT APPROVED LIST**

I hereby give SW Extended Day Program permission to release my child to one or more of the following persons:

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_

MEDICAL CONCERNS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE \_\_\_\_\_\_\_\_\_\_\_\_

**SOUTH WOODS ELEMENTARY**

**EXTENDED DAY FEES**

Extended Day payments are due every 2 weeks. Registration & the first 2 weeks fees must be paid in advance.

* **REGISTRATION FEE**: **$50.00** PER CHILD**$70.00** FAMILY (**EARLY BIRD)**
* **AM.** SCHOOL CARE ONLY**: $15.00** PER WEEK PER CHILD
* **PM.** SCHOOL CARE ONLY: **$60.00** PER WEEK PER CHILD

**AM & PM** SCHOOL CARE: **$75.00** PER WEEK PER CHILD

**DAILY RATES**

 **AM--$3.00**

 **PM--$12.00**

**Morning drop off starts @ 6:30 AM.**

**A late fee of $5.00 a minute will be applied if picking your child up after 6 pm. No Exceptions.**

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