



# One Day After School Registration Form

For the 2010/11 School Year

Registration for: \_\_\_\_\_

Date: \_\_\_\_\_

Student: \_\_\_\_\_ Grade \_\_\_\_\_

Student: \_\_\_\_\_ Grade \_\_\_\_\_

Student: \_\_\_\_\_ Grade \_\_\_\_\_

Parent (guardian): \_\_\_\_\_

Address: \_\_\_\_\_

**After Hours Contact Info:** Please provide the proper contact information where a parent/guardian can be reached **during the After Hours program, 3:15 pm—5:30 pm.**

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Alternate Emergency Contact Person: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Phone: \_\_\_\_\_

**Release Information:**

After Hours ends promptly at 5:30 p.m. Please list the person(s) who may pick up your child.

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

**One-day, \$20 per student registration is due by the beginning of the school day for which you are registering.**

You may send payment along with this completed form with your child to be handed to their teacher in homeroom.

**Or,** you may complete this form and mail payment ahead of the date to:

**Faith Heritage School**  
3740 Midland Ave.  
Syracuse, NY 13205  
ATTN: Laura Radziewski

Please make your check payable to  
**Faith Heritage School.**

Registration Fee: **\$ 20.00**

X no. of students participating \_\_\_\_\_

**Total Payment: \$ \_\_\_\_\_**

**(Note: After Hours** operates only on regular class days. The program will not be open during school vacations, holidays, snow days or other breaks.)