

FAMILY NAME _____

Complete information on front & back sides.

**HCLS LATCHKEY 2017-2018
Registration & Enrollment Contract**

_____	_____	_____
Child's Name	Grade	Date of Birth
_____	_____	_____
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_____	_____	_____
Child's Name	Grade	Date of Birth
_____	_____	_____
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I understand and will adhere to the following terms:

- Latchkey program will be open according to the official school calendar of Holy Cross Lutheran School and closed during vacations, early release days, and inclement weather days.
- Latchkey fee is \$3.75 per child, per hour. Charges begin from the time the child signs in, until the child is signed out, taken to the nearest half hour. If my child is at school before 7:50 a.m. for morning Latchkey, the charge will be for the full hour. The fee for children signed out after 6 p.m. is \$1/minute. I will be billed maximum time if I do not sign my child(ren) out of Latchkey.
- I am responsible for any fees accrued. An auto-draft process for payments will be set up and required. I will give two-week notice in writing prior to withdrawal from the program during which time I will be responsible for payment of fees.
- If my child is having problems adjusting to the program, there may be a need for discussion between the Latchkey Director and myself.
- In the event of after-school activities such as sports, church events, etc., the Latchkey staff will be notified in writing one week previous and the Latchkey staff may then sign out my child(ren).** Latchkey fees will accrue until an authorized person signs out my child.
- My child(ren) and I will support the Latchkey program and staff and I will consult the Latchkey Director if I have any concerns.
- The Latchkey program will assume responsibility for my child(ren) from the time he/she signs in until the child(ren) is signed out by an authorized person. During this time my child(ren) will obey the Latchkey rules and follow all instructions given by Latchkey and school staff.
- I will complete the Latchkey Electronics/Computers Contract, particularly if my child(ren) will be using (school and/or personal) electronics/computers during Latchkey.

By signing below:

- I have read the policies listed on this Registration & Enrollment Contract and will also read and adhere to the policies listed and the Parent Handbook provided by the school.
- I have prepaid the \$50.00 Registration fee, which includes the \$15.00 Processing fee and the \$35.00 Prepayment and have attached this to my form.
- I am aware that Latchkey will obtain any medical information provided for the school.

Please complete information on back & front sides.

Signature of Parent or Guardian

Date

Office: _____	\$ _____	_____
Date Rcvd	Amount	Card/Cash/Ck #

Family Name

Address

City

Zip

Person(s) responsible for payment of fees (and address if different from above):

Parents or Guardians

Name

Phone # where parents can be reached during LK hours

Parental Status

Married Single Divorced Separated

Is there a custody issue of which the Latchkey staff should be aware? If yes, please explain.

Yes No

If single/divorced/separated, do you give permission for the mother/father/step-mother/step-father to receive billing statements/information?

Yes No

If yes, please list name and address: _____

(This information is confidential and is strictly for your child's protection.)

Persons authorized to pick up child(ren) if parents are unavailable:

Name _____ Address _____

Wk / Hm Phone #'s _____ Relationship to Child _____

Name _____ Address _____

Wk / Hm Phone #'s _____ Relationship to Child _____

Food/ Medical Allergies (If Yes, please list them below): Yes No

If there is any information, regarding your child(ren), you feel would be pertinent for Latchkey staff to know, please attached a separate letter to this contract.

Please pick up a Latchkey flyer for more information on the program.