

## CCS - HAMILTON BEFORE SCHOOL CARE REGISTRATION FORM

The CCS BSC program involves organized, supervised care for CCS students staying before school as early as 7:30 a.m. until 8:30 a.m. Interested parents must register annually.

This program provides your children with the following:

- supervised recreational and play time usually inside the school or on the playground
- partly supervised quiet areas for students to read or complete homework

The fee is \$5.00/child per full session and \$3.00 for part session only (after 8:00 a.m.). Payments are due monthly.

*Important: Please escort your child to the music room each morning.*

If this program interests you, please indicate (x) which situation best applies to you. **arriving before 8** **after 8**

- My child(ren) will be attending regularly, 3 to 5 mornings per school week:
- My child(ren) will be attending occasionally, 1-2 mornings per school week:
- My child(ren) will be attending only as needed.

### Please provide the following contact information:

Parents 1<sup>st</sup> and Last Names: \_\_\_\_\_

\_\_\_\_\_

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

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

### Telephone Numbers (including area codes):

Home phone: \_\_\_\_\_

Dad's work: \_\_\_\_\_

Dad's cell: \_\_\_\_\_

Mom's work: \_\_\_\_\_

Mom's cell: \_\_\_\_\_

Name of Drop - Off Person #1 : \_\_\_\_\_

Phone and cell numbers: \_\_\_\_\_

Name of Drop - Off Person #2: \_\_\_\_\_

Phone and cell numbers: \_\_\_\_\_

**What is your email address:** \_\_\_\_\_

**Doctor's name and phone number** \_\_\_\_\_

**What is the family code word in case there are unexpected changes to routines.**

\_\_\_\_\_

**Children requiring care:**

Name (first and last)	Gender	Birth date (M/D/Y)	Grade & Class	Health Card Number (optional)

**Please detail things we need to know including special arrangements, medical information, allergies or special needs.**

Indicate the **TIME** you are likely to drop-off your child(ren) for each day registered.

<i><b>NAME of Child</b></i>	<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>	<b>THURSDAY</b>	<b>FRIDAY</b>

PARENT(S) SIGNATURE(S) \_\_\_\_\_

DATE: \_\_\_\_\_