

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 1st 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) |
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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>NAME of Child</i> | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|-----------------------------|---------------|----------------|------------------|-----------------|---------------|
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PARENT(S) SIGNATURE(S) _____

DATE: _____