

## Extended Day and Drop-In Registration Form

Child(ren)'s Name	
Parent's Name	
Days I plan to use Extended Day:	
Hours I will be using Extended Day: Before School	*After School
ILLNESS	
Children who have been home ill during the school day may Day and Drop-In Program. Children must be fever free without off. A child who has recently vomited must wait 24 hours pri	out medication for 24 hours prior to drop
Please initial:	
PICKUP/DROP OFF	
AM Extended Day: The only drop off location for AM extended the security doors will be locked prior to 9 am. Children must extended Day room.	
PM Extended Day: Afternoon Extended Day utilizes the play notice will be on the west entrance if this is the case. Childre adult listed in the family profile on Sycamore.	
Please initial:	
FEES	
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The fee for Extended Day is \$8.00 per hour and is rounded up to the next quarter hour of care time for the eldest student of the family. The rate for additional children is \$5.00 per hour for students from the same family using the service at the same time. Parents/Guardians will receive statements for every 4 weeks of care, which are due upon receipt. Fees should be paid online through Sycamore. Payments must be current for a child to stay in Extended Day. \*If a child is picked up after 5:45pm, there is a fee of \$1.00 for every minute beyond that point and this fee will automatically be assigned to your Sycamore account.

HEALTH Things that we should know that might be of help with the care of your children:	
y child has the following food and/or environmental allergies (list child's name):	
SE OF SUNSCREEN, INSECT REPELLANTS, AND/OR COMMERCIAL WIPES	
agnuson Christian School Extended Day and Drop-In Programs may use sunscreen lotions, e-moistened commercial wipes, and insect repellants only with parents' written permission.	
outhorize Extended Day and Drop-In Program staff to apply a sunscreen product, and/or insect pellant, and/or commercial wipes when needed.	
arent or Guardian Signature Date	
EDICAL EMERGENCY	
case of emergency, parents will be contacted immediately. There may be a case when action must e taken immediately. If this is the case, the following will give us permission to take the necessary tion.	
nereby give permission and authorize Magnuson Christian School Extended Day and Drop-In ogram to seek emergency medical assistance when deemed necessary by the staff. I understand at this may involve transportation to a medical facility for emergency medical attention.	
arent or Guardian Signature Date	

## **UNSAFE PERSONS & CHILD RELEASE**

I understand that it is my responsibility to alert MCS staff of any unsafe persons who are not allowed to pick up my child. I further understand that MCS staff will not release my child to anyone who is not listed on my authorized pick up list in Sycamore.

Parent or Guardian Signatur	iture
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Date