

# REFERENCE FOR ADMISSION - C

FOR PRESCHOOL - 2K, 3K, 4K

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## AFTER SCHOOL REGISTRATION FORM 2010 - 2011 SCHOOL YEAR

Yes, we would like to enroll our child in RSCA After School Program for \_\_\_\_ day(s) per week.

### Personal Information

Child's Name: \_\_\_\_\_ RSCA Grade: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Sex (Circle One): Male / Female

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone / Pager: \_\_\_\_\_ Email: \_\_\_\_\_

### Pre-School Day Care Information

AGE/GRADE	DAYS OFFERED	TIME	DAILY RATE	WEEKLY RATE	ANNUAL RATE
2K & 3K	TUESDAY - THURSDAY	12:15 - 4:00	\$12.00	\$30.00	\$900.00
4K	MONDAY - FRIDAY	12:15 - 4:00	\$12.00	\$40.00	\$1200.00

**LATE PICK-UP FEE:** Parents will be charged a dollar per minute, per child, after 4:00 PM.

Any known Allergies: \_\_\_\_\_

There will be no After School Care on any days when school is not in session including inclement weather days and early dismissal days. Additionally, all students who are not picked up from carpool within the specified time-frame will automatically be sent to After School where the **Unscheduled Daily Rate** will apply. I (We) understand that my child must be signed out of After School Care by a parent or one of the following persons authorized by me (us):

\_\_\_\_\_  
 \_\_\_\_\_

I (We) understand that I (We) will be responsible for After School Care tuition at the time of billing or my (our) child will not be allowed to attend After Care the following month. I (We) understand there are no refunds for missed days.

\_\_\_\_\_  
 Parent / Guardian Signature

\_\_\_\_\_  
 Date