

DOUGLAS AT DAWN/DUSK BREAKFAST CLUB/WORK & PLAY

2018/2019
MONTHLY REGISTRATION FORM*

Current Date: _____

Start Date: _____

Please return your registration form to "Douglas at Dawn/Dusk" via the Douglas School Office along with the \$25 registration fee. The non-refundable registration fee will be applied to the September invoice. Invoices will be emailed at the beginning of each month a month in advance of attendance and are due on the 15th of each month (e. g. invoices for September attendance will be emailed August 1st and due by August 15th). **Please make checks payable to AB Community ED.** Schedule change requests must be made by the 15th of the month preceding the invoice date in order to affect billing (e.g. by September 15th to affect October 1 invoice for November attendance). Please note changes will not be made to August 1 invoices once set; scheduling changes for September can be made via Drop In billing.

Student's Name (last, first): _____ Teacher/Grade in 2018-19: _____

Home Address: _____

Home Phone: _____

Father/Guardian Name: _____

Business Phone: _____

Cell Phone: _____

Email Address: _____

Mother/Guardian Name: _____

Business Phone: _____

Cell Phone: _____

Email Address: _____

Please select schedule by checking off options below: **PRICES BELOW REFLECT THE TUITION PER MONTH!**

Program	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast Club (7:00 – 8:35)	___ \$45.20	___ \$52.26	___ \$50.85	___ \$52.26	___ \$52.26
Work and Play (3:20 – 6:00)	___ \$81.34	___ \$94.05	___ \$96.43		___ \$94.05
Work and Play - ALL Thursdays (12:50 – 6:00) Please either bring lunch or order lunch through the Early Release Lunch Program.				___ \$159.34	

Tuition is based on the number of a particular day of the month your child attends in the school year. It is based on a yearly rate, which is then divided into 10 equal payments.

Please note: If your child is absent from the program and is signed up on a Monthly basis, we regret that we cannot grant any refunds.

Please be aware that the Douglas at Dawn/Dusk program does not have a school nurse on duty. It is important that you communicate medical needs to our staff.

Food Allergies: _____

Other Severe Allergies/Medical Conditions: _____

Epi Pen: _____ Epi Pen Supplied to program: yes/no (circle one)

Expectations on Homework Completion: All _____ Some _____ None _____

_____ I have read, understand and agree to the Douglas at Dawn/Dusk policies posted on the Douglas website at <http://douglas.abschools.org/> (please check and initial).

_____ I have attached the \$25 registration fee (to be applied to the September invoice).

I give my permission for my child to participate in the Breakfast Club/Work & Play Program. I will not hold the Douglas at Dawn/Dusk program liable for any injury or mishap sustained by my child.

Signature: _____

Any questions, contact: Sasha Opel (Program Director) 508-596-0585 sopel@abschools.org or Kate Murray (AB Extended Day Coordinator) at Kmurray@abschools.org .