FIT ACADEMY

After School Care Registration Form—2023_2024 - Students K-5

Student(s) name Emergency Contact Name		Grade		Fees per Student Afternoons: 2:50pm to 5:00 pm		
				•	•	
					-	
		Phone #				
1			Total Enclosed: \$			
						
dates your stud				indicating the h	ours.	
	Month					
Date	3pm-4pm	3pm-5pm	Date	3pm-4pm	3pm-5pm	
		17 _				
		18 _				
		19 _				
		20 _				
		21				
		22				
		23				
		24				
		25				
		26				
		27				
		28				
		29				
		30				
		31				
	dates your stud	dates your student(s) will attend Month Date 3pm-4pm	Date 3pm-4pm 3pm-5pm 17 18 19 20 21 22 23 24 25 26 27 28 28 28 28 28 28 28	\$15 for \$27 for \$10 add registration tract Name Phone # Total E dates your student(s) will attend After School Care and a checkmark Month Date 3pm-4pm 3pm-5pm Date 17	\$15 for 3:00pm to 4:00p \$27 for 3:00pm to 5:00p \$10 additional fee for lat registration, pending availa htact Name Phone # Total Enclosed: \$ Month	

<u>Please print and mail/return form by Wednesday of the prior week with check payable to:</u> FIT Academy Charter School