



Central Park School for Children AfterSchool Clubs

Third Quarter Club 2011 Registration Form DUE JANUARY 12th

Parent(s)' or Guardian(s)' name: _____ Phone no. _____

Days my child(ren) will attend: M T W TH F (circle all that apply)

I NEED A RECEIPT Y N

Sibling and multiple club discount! Subtract \$20.00 from your second and third club. You may also subtract \$20.00 from your second and third child's club cost. Please take home a club flyer for details about club times, dates and prices (located in the lobby and online). Please email amye@cpsfc.org with any questions or call 682-1200 x228 and thank you for your support of clubs!

Child 1: Name: _____ Grade: _____ Club/day _____ Club/day _____ Cost: \$ _____ .00	Child 2: Name: _____ Grade: _____ Club/day _____ Club/day _____ Cost: \$ _____ .00	Child 3: Name: _____ Grade: _____ Club/day _____ Club/day _____ Cost: \$ _____ .00
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Total enclosed \$ _____ .00

Emergency Contact Information If your child has an emergency during ASC, where can we reach you or another designated adult?

(1) _____
Name Relationship to child (parent/guardian, aunt, neighbor, etc) phone number(s)

(2) _____
Name Relationship to child (parent/guardian, aunt, neighbor, etc) phone number(s)

Please initial: _____ I understand that I am financially responsible for any CPSC property lost or damaged by my child. I will also discuss this with my child.

_____ Every policy in CPSC's Parent Handbook also applies to CPSC's After School Clubs.