



7

Child Care Rate: _____ **Full Time**
(Check One) _____ **Hourly**
_____ **½ Day**

Registration/Activity Fee _____
\$110.00 2 yr. olds-K Rec'd _____
\$135.00 1st-7th Rec'd _____
Physical on File _____

GLORIA DEI LUTHERAN SCHOOL - 2022 SUMMER ADVENTURES

Tee Shirt Size (circle one): Youth - S M L or Adult - S M L XL Grade Entering: _____

*Child's Name _____ Nickname _____
last first middle

Child's Home Address: _____
and street name city state zip

Home Phone Number _____ Birth Date: Month: _____ Day: _____ Year: _____

Male/Female School Attended 20/21 _____

* Father's Name _____ Title/Rank _____

Father's Home Address: _____
and street name city state zip

Father's Place of Employment: _____

Father's Work Address: _____
and street name city state zip

E-mail: _____ ☐ Primary Contact

Employer _____ Work Phone _____

Home Phone _____ Cell Phone _____ ***Please circle primary phone number**

Social Security Number XXX - XX - _____ Occupation _____

* Mother's Name _____ Title/Rank _____

Mother's Home Address: _____
and street name city state zip

Mother's Place of Employment: _____

Mother's Work Address: _____
and street name city state zip

E-mail: _____ ☐ Primary Contact

Employer _____ Work Phone _____

Home Phone _____ Cell Phone _____

Social Security Number XXX - XX - _____ Occupation _____

Please circle one: 1) Married 2) Divorced 3) Separated 4) Single 5) Widow(er)

Parent/Guardian with Legal Custody _____

Church/Denominational Preference _____ Church Membership _____

Ages of Brothers _____ Ages of Sisters _____

I hereby make application for the attendance of my child in Gloria Dei Lutheran School's summer child care program. I understand that the Registration Fee is to accompany this application and is not refundable. I realize that upon registration of my child, I am obligated to pay fees from the date of admission, on a monthly basis, until I no longer need this service. I understand it is my responsibility to give the school written notification for requests to change billing status, or to withdraw my child from the child care program.

(OVER)

Payment is due by the 15th of each month and is considered delinquent if not received by 5:00 p.m. on the 20th of each month or the last working day prior to the 20th. A \$10.00 late fee, per child, will be assessed on payments received after the 20th of the month. Payments not received by the end of the month will result in my child not being able to return to child care until the account is current. All payments must be made by check, money order, or credit card. (**NO** Cash)

Child care ends at 6:00 p.m. If a child is picked up at 6:01 p.m. from child care, the student's account will be charged an automatic \$15.00 late fee and then \$10 for each 5 minutes after that. (ex: 6:05p.m. = \$25.00). I understand that Gloria Dei Lutheran School will assess a \$35.00 service charge on all returned checks. Accounts turned over for collection will be assessed legal fees and interest per state law.

There will be no pro-rating of child care due to sickness, holidays, vacations, absences or withdrawals.

Parent/Guardian	Date	Parent/Guardian	Date
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Are you willing for the following information to be released to other Gloria Dei parents on request (for birthday party invitations, etc.)?

Your address: Yes _____ No _____ Your phone #: Yes _____ No _____

Does your child have any medication, food or environmental allergies, or pre-existing medical conditions? If so, what?

Does your child have any unusual habits, fears or attachments? If so, what?

Actions to take in an emergency: _____

Signature _____

NOTE: If you have legal custody of this child, a copy of the Court Order must be filed in the child's school records to protect the school when refusing to release the child to a parent.

Per Court Order on file, the following is/are **not** authorized to pick up this child:

NOTE: All students new to Gloria Dei's Child Care Program **MUST** have a current physical form on file **prior** to the first day of attendance.

FIELD TRIP CONSENT: We require that you give your consent for your child to accompany his/her child care group on all field trips during the summer that are taken when he/she is present. Signs will be posted outside the School Office each Monday with details for that week's trip(s). We reserve the right to limit and withdraw field trip privileges if a child is having behavior or discipline problems.

Signature _____

STUDENT INTERNET INCLUSION: In an effort to promote Gloria Dei Lutheran School, its students and its programs, student photos, class photos, candid shots, video, and the

like, may appear on the schools official Web Site, Social Media - Facebook, Twitter, etc., the individual teacher's web page link, and/or school-child care pamphlets, brochures, post cards, etc. This will be done with the review of the Head of School.

MINOR INJURY REPORT: "I understand that in case of a minor injury to my child, I will be notified in writing, by a note placed in my child's bookbag."

Gloria Dei Lutheran School and Child Care reserves the right to withdraw any child from the program if it is deemed necessary for the welfare of the child or the program.

Signature_____

A copy of the completed registration is available upon request. Initial _____

Administrator Signature _____ Date _____