

**BRITTONKILL COMMUNITY CHILD CARE PROGRAM
REGISTRATION FORM**

Scope of the Program: To provide care for students in Kindergarten through Grade 6.

Hours of Operation:

Before School	7:00 to 8:45 AM
After School	3:30 to 6:00 PM.

Location: Tamarac Elementary School Cafeteria and Gymnasium

Charges: For elementary students, the cost will be \$5 per day per child for either the before or after school programs. For elementary students enrolled in both before and after school, the charge will be \$10 per day. For middle school students, the charge is \$8 per day.

For those students enrolled full-time, a half-day conference service will be offered. There will be a charge of \$6 in addition to the regular before and after school charges.

Payments: Parents will be provided a payment schedule at the start of each year. **All payments should be made by check** not later than the due date shown. Your cancelled check will serve as your receipt.

There will be a charge of \$20 for any returned checks and a charge of \$10 for each additional five minutes for students picked up after 6:00 p.m.

Donations: The program would appreciate donations of paper, crayons, games, or other activities, which the children may use and enjoy.

Application Form: (attached) should be submitted (post marked no later than August 15th*) to:
Brittonkill Community Child Care Program Director
Tamarac Elementary School
3992 NY 2
Troy, New York 12180

****Due to limited space, applications will be accepted on a "first come, first served" basis based on the date of the post mark.***

Registration Agreement: Parent understands the following and must sign the attached registration form:

- 1. Parent is responsible for bi-weekly payment based on scheduled attendance regardless of any absences.***
- Delinquent payments may result in dismissal from the program. Collection will be made through Small Claims Court if necessary.
- Only a permanent change in child's scheduled attendance (in writing) will reflect a change in payment effective the next billing period.
- Parental cooperation is essential in dealing with any discipline concerns. Severe or continued discipline concerns may result in dismissal from the program.
- BCCCP is not responsible for lost, damaged or stolen property.
- In case of an emergency that requires immediate medical attention, parent authorizes that the child be taken to the hospital.

**BRITTONKILL COMMUNITY CHILD CARE PROGRAM
2010-2011 REGISTRATION FORM**

Child's Name: _____ **Grade** _____ **Date of Birth:** _____

Child's Home Address: _____

Attendance Schedule: Please circle days and times of expected attendance

Before School: M T W TH F **After School:** M T W TH F

Parent or Guardian child resides with: _____

Father's Name: _____

Home Address (if different from above): _____

Place of Work: _____ **Work Telephone:** _____

Home Telephone: _____ **Cell Number:** _____

Mother's Name: _____

Home Address (if different from above): _____

Place of Work: _____ **Work Telephone:** _____

Home Telephone: _____ **Cell Number:** _____

Emergency contact (not parent): _____ **Phone:** _____

Persons authorized to pick up your child. (Please submit any later changes in writing)

1. Name _____ Number _____

2. Name _____ Number _____

3. Name _____ Number _____

4. Name _____ Number _____

Child's Physician: _____ **Telephone Number:** _____

Health Concerns: _____

**I HAVE READ, UNDERSTAND AND WILL COMPLY WITH THE ATTACHED
REGISTRATION AGREEMENT.**

Signature of Parent or Guardian: _____ **Date:** _____