

**Holy Trinity Catholic School
Extended Day Program
Application for Admission 2010-2011**

Registration Fee: A non-refundable registration fee of \$50.00 per child due on or before June 5.

Grade:

(Circle grade) PK (5 day) PK(3 day) K 1 2 3 4 5 6 7 8

PLEASE PRINT

Student Information

Student's Name _____
Last First Middle

Home address _____
Street

_____ City State Zip

Home Phone() _____ Date of birth _____

Male _____ Female _____

Parent/Guardian Information

Mother's Information:
Name _____

Father's Information:
Name _____

Address _____
(If different from child's)

Address _____
(If different from child's)

Home Phone () _____

Home Phone() _____

Work Phone() _____

Work Phone() _____

Pgr./Cell () _____

Pgr./Cell () _____

E-mail _____

E-mail _____

Please check schedule required:

Pre-Kindergarten - 8th Grade

Before School Only: \$8.00 per day Monday Tuesday Wednesday Thursday Friday

After School Only: \$15.00 per day Monday Tuesday Wednesday Thursday Friday

Before/After School: \$20.00 per day Monday Tuesday Wednesday Thursday Friday

If a payment is not made by 6:00 on Monday, it will be considered late and a \$10.00 late fee will be assessed. There is a \$15 NSF fee for returned checks. All checks should be payable to HTCS-ED.

Do Not Write in This Space-Office Use Only

Date Registration Rec'd: _____ Amount Paid: _____ Fee Paid: Cash _____ Check#: _____

Siblings also registered: _____