

OREGON EPISCOPAL SCHOOL

MIDDLE SCHOOL AFTER SCHOOL PROGRAM

Registration 2010-2011

This application reserves a space for your child pending completion of the attached Middle School After School Program Participation Agreement.

Student's Name: _____ Grade in 10/11: _____

Student's Name: _____ Grade in 10/11: _____

Parent's Name: _____

Home Phone: _____

Work Phone(s): _____

Cell Phone (s) _____

Designated pick-up person(s) _____

- I/we would like to enroll in the Middle School After School Program **Full-Time** (3 days per week or more). The charge is \$2,750/year or \$306.00/month.
- I/we would like to enroll in the Middle School After School Program on a **DROP-IN** basis offered at \$7.00/hour. There is a one hour minimum charge and after that, charges are calculated to the nearest quarter hour.

Please complete this form and return it to the MS office.