## Latchkey Registration Form 2017 – 2018

Nome of Childrent(s)				Grad	e for 2	017-2018	
Name of Student(s)						<del></del>	
						_	
						_	
Home Address							
				. Home Phone:			
Additional Contact Informa	ation						
Parent Name		Cell Phone			Work Phone		
Parent Name		Cell Phone		<del></del>	Work Phone		
E-mail Address (es)							
Emergency Contact Names	/Phones						
Name / Relationship				Phone Number			
Name / Relationship				Phone Number			
Please circle Programs of a	Attendance						
Before School (7	:00 - 8:00 am)	M	Т	W	Th	F	
After School (3	:00 - 6:00 nm)	Μ	т	W	Th	F	