

Father Marquette Catholic Academy
After School Program - Grades 1 through 13 year olds

Date_____

Information about the Child/Children to be enrolled:

Child's Name_____ Sex:_____

Entering Grade_____ Birthdate_____

Parent Information:

Mother's Name_____ Father's Name_____

Address_____ Address_____

Email_____ Email_____

Phone_____ Phone_____

Place of Employment_____ Place of Employment_____

Work Phone_____ Work Phone_____

Marital Status_____ Marital Status_____

In the event of an emergency, which parent should be our first attempted contact?_____

Phone Number_____

If there has been a divorce, which parent has custody?_____

As Space is limited please provide Jan Janofski with your next week's schedule by 5:00pm the Thursday prior. This commits you to the space and you will be charged unless your student is sick or we do not have school. If space is not available Jan will let you know on Friday.

Fee: \$11/day for 1 child, \$19/day for 2 children

Parents will sign up to bring snacks on a rotating basis.

A \$10 annual registration fee will be charged to your FACTS account

By enrolling my student(s) in FMCA After School Program and signing this form, I am accepting and agree to abide by the rules, regulation and code of conduct of the school. I understand that all payments will be through FACTS.

Signature Financially Responsible_____

Date_____