



Abington Friends School
Extended Day Program Registration Form
2017-2018

Child Name: \_\_\_\_\_

Class/Grade: \_\_\_\_\_

Child Name: \_\_\_\_\_

Class/Grade: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Parent/Guardian Daytime Phone: \_\_\_\_\_

Parent/Guardian Evening Phone: \_\_\_\_\_

Parent/Guardian Cell Phone: \_\_\_\_\_

Pick Up Person \_\_\_\_\_ Relationship \_\_\_\_\_

Pick up Person \_\_\_\_\_ Relationship \_\_\_\_\_

Would you like your child to attend the Homework Center (Grades 1 – 4)? \_\_\_Yes \_\_\_No

Pick-Up Time Selection:

4 p.m. pick-up \$\_\_\_\_(\$1000) 5 p.m. pick-up \$\_\_\_\_(\$2000) 6 p.m. pick-up \$\_\_\_\_(\$2900)

3 day option 6 p.m. pick-up \$\_\_\_\_(\$2100)

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this Registration Form to the Lower School Office by September 1, 2017.