

**Holy Spirit Catholic School
Extended Day Care
Registration 2023/24**

The _____ family is requesting extended day care for the following children for the
(Please Print) 2023/2024 school year:

1. _____
Child's Full Name **Date of Birth**

Grade 2023-2024 _____ Type of Care Needed: Full Time Part Time

2. _____
Child's Full Name **Date of Birth**

Grade 2023-2024 _____ Type of Care Needed: Full Time Part Time

3. _____
Child's Full Name **Date of Birth**

Grade 2023-2024 _____ Type of Care Needed: Full Time Part Time

4. _____
Child's Full Name **Date of Birth**

Grade 2023-2024 _____ Type of Care Needed: Full Time Part Time

Parent's Name **Parent's Signature**

Address **City, State, Zip** **Phone/Cell No.**

Schedule of Fees:
Registration fee: \$25 due at time of registration
Full time \$250 per month Beginning the first day of school August 2023
Part time \$15 per day