

Medfield Afterschool Program, Inc. P.O. Box 18 Medfield, MA 02052 (508) 359-0003

P.O. Box 18 Medfield, MA 02052 (508) 359-0003 www.medfieldafterschoolprogram.com annette.map@comcast.net

2019-2020 REGISTRATION FORM FOR GRADES 1-6

Priority is given to those currently enrolled in program and those registering prior to Friday, March 15, 2019

Child's Name: _____

Parent/Guardian Names:			
Phone: (Home)	(Cel	l)	
Email:			
Address:	Start date:		
		(if other	than the first day of school)
Grade in 2019-2020			
Days requested: Monday Tues	sday Wednes	day Thursda	ay Friday
*If not requesting every day, do you have any fle	exibility with the days y	ou chose?	
2019-2020 Tuition Rates:			
Daily tuition from school dismiss	sal – 6:00 pm:	\$34.00	
Full time (Monday-Friday) receive	ve 10% discount:	\$153.00	
(siblings with the lesser tuition re	eceive an additional	5% discount)	
Please return this form by mail with a \$5 mail to: The Medfield Afterschool Progr			
For Office Use Only			
Registration Fee received:			
	Amount	check #	date
Deposit received:	Amount	check #	date