EAGLE Country 2022-2023



Childs Name:			
Morning Care:	Afternoon Care:		
Childs Birthdate://	Grade:Sex: Ma	le Female	
Mothers Name:	Cell:	WK:	
Mothers Address:	Email:		
Fathers Name:	Cell:	WK:	
Fathers Address:	Email:		
Child resides with:Mot	herFatherBoth	Other	
MEDICAL CONTACT			
Childs Doctor:	Phone:Address	:	
May SWE call another Doctor it	f unable to contact the above?	yesno	
CUSTODIAL RIGHTS: PAREN	TS PERMITTED TO REMOVE TH	HE CHILD	
Father:YES/NO Mothe	er:YES/NO Step-	Parent:YES/NO	
If NO, custody papers on the Eschool office to legally enforce.	BIOLOGICAL/GUARDIAN PAREN	ITS must be on file in the	
PERMITTED CHILD PICK UP/	EMERGENCY CONTACT APPROVI	ED LIST	
I hereby give SW Extended Day the following persons:	y Program permission to release m	y child to one or more of	
Name	Relationship	_Phone	
Name	Relationship	Phone	
Name	Relationship	Phone	
MEDICAL CONCERNS:			
SIGNATURE]	DATE	

SOUTH WOODS ELEMENTARY

EXTENDED DAY FEES

Extended Day payments are due every 2 weeks. Registration & the first 2 weeks fees must be paid in advance.

- REGISTRATION FEE: \$50.00 PER CHILD \$70.00 FAMILY
- AM. SCHOOL CARE ONLY: \$25.00 PER WEEK PER CHILD
- PM. SCHOOL CARE ONLY: \$65.00 PER WEEK PER CHILD

AM & PM SCHOOL CARE: \$90.00 PER WEEK PER CHILD

DAILY RATES

AM--\$5.00

PM--\$13.00

Morning drop off starts @ 6:30 AM.

A late fee of \$5.00 per minute will be applied if picking your child up after 6 pm. No Exceptions.

