



Please (check) what **SCHOOL** your child attends:

Leigh

Giles

Pennoyer

Union Ridge

## Norridge Park District Extended E-Learning Registration Form

First Name (student): \_\_\_\_\_

Last Name (student): \_\_\_\_\_

First Name (parent/guardian): \_\_\_\_\_

Last Name (parent/guardian): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Primary Phone #1: \_\_\_\_\_

Primary Phone #2: \_\_\_\_\_

Primary Email #1: \_\_\_\_\_

Secondary Email #2: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

Please provide **TWO** copies of residency: **Photo ID | Utility Bill | Apartment/Home Lease | Tax Bill | Voter Registration Card**

Please provide a copy of your child's birth certificate:

Please indicate your **child's grade level**: \_\_\_\_\_ and what **school they attend**: \_\_\_\_\_

Please indicate what days, dates and times you are planning on registering for:

**(Place X in each day that you plan on attending)**

\*Please Note there is a **\$30 Non-Refundable** Registration Fee applied to balance\*

E-Learning Before Care : ( <b>\$6 per day</b> )				
Monday	Tuesday	Wednesday	Thursday	Friday

*\*Will require a minimum amount of children to participate in order to run AM before care at both schools\**

Half Day Option: ( <b>\$24 per day</b> )				
Monday	Tuesday	Wednesday	Thursday	Friday

Full Day (Wednesdays & Alternating School Day Attendance): ( <b>\$40 per day</b> )				
Monday	Tuesday	Wednesday	Thursday	Friday

Park District After School Program: ( <b>\$10 per day</b> )				
Monday	Tuesday	Wednesday	Thursday	Friday

### Office Use Only:

Total Amount of Days	E-Learning Before Care	Half Day Supervision	Fully Day Supervision	After School	Participant Total
<b>Cost Per Day</b>	\$6.00 x	\$24.00 x	\$40.00 x	\$10.00 x	\$