

Date Received: _____

Rv'd by last name: _____

Date Entered in PS: _____

Morning Academy & Extended Day Registration Form

Student Data

Student First & Last Name: _____ Grade: _____

Campus (circle one): Brightwood Capitol Hill Congress Heights Petworth Shaw Trinidad

Names of siblings participating in Morning Academy and/or Extended Day programs:

1) _____ 2) _____
3) _____ 4) _____

Program Usage

Morning Academy (Program starts at 7AM, NO students accepted after 7:15AM to ensure all receive 30 minutes of interventions)

Please check the box that reflects the days you are registering your child for Morning Academy.

Monday-Thursday Monday-Friday Friday ONLY Service not needed

Extended Learning (Program runs from 4-6PM Monday-Thursday and 1:30-6PM on Fridays)

Please check the box that reflects the days you are registering your child for Extended Learning.

Monday-Thursday Monday-Friday Friday ONLY Service not needed

Persons Authorized to Pick Up Child after Extended Day

Contact #1 Authorized to Pick Up - Check box if designated emergency contact

First & Last Name: _____ Relationship to Student _____

Cell Phone: _____ Home Phone: _____ Work Phone: _____

Email: _____

Contact #2 Authorized to Pick Up - Check box if designated emergency contact

First & Last Name: _____ Relationship to Student _____

Cell Phone: _____ Home Phone: _____ Work Phone: _____

Email: _____

Contact #3 Authorized to Pick Up - Check box if designated emergency contact

First & Last Name: _____ Relationship to Student _____

Cell Phone: _____ Home Phone: _____ Work Phone: _____

Email: _____

Dismissal from Extended Learning - Please check ALL forms of approved dismissal

Walk (at 6PM dismissal) Public Transportation (at 6PM dismissal) Picked up (by authorized contacts listed above)

By signing below,

- I certify that all answers given in this application are true, accurate and complete.
- I acknowledge completion of this form indicates enrollment of my child into Morning Academy and/or Extended Learning for the days designated above.
- I am responsible for paying the applicable registration fee in order for my child to participate in the program(s).
- Failure to pay by the 1st of the month will result in my child's dismissal from the program for that month. (*Invoices will be sent on the 20th of the preceding month.*)
- I understand that the drop off time for Morning Academy is between 7-7:15AM.

Signature

Date