

TRINITY AFTER SCHOOL
2005-2006
REGISTRATION FORM
Pre-Kindergarten – Grade 6

NAME OF CHILD _____ AGE _____ SEX _____

SCHOOL _____ GRADE _____ BIRTHDATE _____

NAME OF PARENTS OR GUARDIAN: _____

ADDRESS _____ HOME PHONE _____

CITY _____ STATE _____ ZIP _____

FATHER'S WORK _____ WORK PHONE _____

MOTHER'S WORK _____ WORK PHONE _____

CHILD'S PHYSICIAN _____ PHONE _____

INFORMATION WE SHOULD KNOW ABOUT YOUR CHILD: _____

I hereby give permission to secure medical and/or emergency surgical treatment for the above named minor child while in Trinity Presbyterian School's care.

Name of individual to contact should attempts to reach me or my spouse remain unsuccessful:

Name _____ Relationship _____ Phone _____

SIGNATURE OF PARENT/GUARDIAN _____ DATE: _____

CHURCH PREFERENCE _____

AFTER SCHOOL HOURS AND TUITION FEES:

School Days: Monday – Friday, 2:30 p.m. – 5:30 p.m.; Teacher work days: 7:30 a.m. – 5:30 p.m.

- \$30.00 per week for the first child -- \$28.00 per week for each additional child in the family.
- Tuition is on a weekly basis, regardless of the number of days attended.
- No additional fees will be charged for "long" days.
- \$5.00 per week transportation fee for Covington and South Scotland School Students.
- Registration Fee: \$25.00 (\$15.00 For Trinity Church Members)

For additional information call 276-7689 (weekday afternoons) or visit www.trinity4u.org/schools/
Please return completed form and registration fee to:

Trinity Presbyterian Church
13000 Blue's Farm Rd.
Laurinburg, NC 28352
