

## 4K Husky Den Registration Contract

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Primary Parent (responsible for billing) \_\_\_\_\_

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

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

Email: \_\_\_\_\_

Second parent (if applicable): \_\_\_\_\_

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

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

Email: \_\_\_\_\_

Please list any allergies we should be aware of for snack purposes

\_\_\_\_\_

**Fees:** \$3 per hour per child with a **\$15 registration fee per family at school registration**. Billing is bimonthly and a spreadsheet for taxes is available by January 31<sup>st</sup>.

*All checks are made payable to: **New Holstein School District***

**Session times:** M T Th F -- 8:00-12:00 PM or 11:00 AM-3:00PM (depending on 4K placement)  
 Wednesdays -- 8:00 AM -2:00 PM

Program start date: \_\_\_\_\_ **Please indicate the days and actual hours needed for scheduling purposes:**

Monday	Tuesday	Wednesday	Thursday	Friday

*New Holstein Elementary School also offers a before and after-school enrichment program, if interested, please indicate below your needs.*

### Husky Den Before/After-school Enrichment Program Hours:

M T W Th F -- 5:45-7:30 AM -- M T Th F--3:00-6:00 PM  
 Wednesdays--2:00-6:00PM

**Please indicate the days and actual hours needed for scheduling purposes:**

Monday	Tuesday	Wednesday	Thursday	Friday
AM	AM	AM	AM	AM
PM	PM	PM	PM	PM

Parent Signature: \_\_\_\_\_

For office use only: Received Date \_\_\_\_\_ Confirmation Date \_\_\_\_\_ Amount Received \_\_\_\_\_