

Summer School 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:

Incoming 4K and children not attending Summer School remain in Husky Den for the four hours of Summer School at the Elementary School.

Fees: \$3 per hour per child with a \$15 registration fee **per new family** at registration. Billing is bimonthly.

*All checks are made payable Pick up: **New Holstein School District***

Husky Den After-school Enrichment Program Hours: M -F – 6:00-7:45 AM—Elementary School
8:00-12:00—Incoming 4K and children not attending Summer School

M -F --12:00-6:00 PM—Elementary School

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

Monday	Tuesday	Wednesday	Thursday	Friday
Drop off AM	Drop off AM	Drop off AM	Drop off AM	Drop off AM
8:00-12:00	8:00-12:00	8:00-12:00	8:00-12:00	8:00-12:00
Pick up PM	Pick up PM	Pick up PM	Pick up PM	Pick up PM

Parent Signature: _____

For office use only: Received Date _____ Confirmation Date _____ Amount Received _____