

**ST. BERNADETTE SCHOOL**  
**EXTENDED DAY REGISTRATION FORM**  
*(Please type or print all information)*

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_  
*(first name) (Last Name) (Middle Initial)*

Address: \_\_\_\_\_ Home Phone# \_\_\_\_\_  
*(no.) (Street) (City) (Zip Code)*

E-Mail Address: \_\_\_\_\_

**DAYS ATTENDING EXTENDED DAY PROGRAM: MON\_\_ TUES\_\_ WED\_\_ THURS\_\_ FRI\_\_**

Name of Parent(s) or Guardian(s) with whom the child lives: \_\_\_\_\_

If separated/divorced: Name, address and phone of non-custodial parent: \_\_\_\_\_

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Father's Name: \_\_\_\_\_ Work phone# \_\_\_\_\_

Cell # \_\_\_\_\_

Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work phone# \_\_\_\_\_

Cell # \_\_\_\_\_

Occupation: \_\_\_\_\_

Signature (Custodial Parent/Guardian): \_\_\_\_\_ Date: \_\_\_\_\_

**FEES AND PAYMENTS**

The Registration Fee for the Extended Day Program is \$50.00 per family.

Monthly Fee schedule for the Extended Day Program:

Full time (5 days per week) \$400  
4 days per week \$345  
3 days per week \$295  
2 days per week \$250  
1 day per week \$170  
Drop in fee (per day) \$35