



ST. JOHN THE BAPTIST CATHOLIC SCHOOL

Above and Beyond Child Care Registration After School Care

Family Name: _____

Email Address: _____

Phone: _____

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____

\$30.00/child (max of \$70.00/family)
(Registration fee is due with registration at start of care.)

For Office Use: Paid Check #: _____
--