

# **St. Timothy's School Extended Day Program** **Saints Club(K-5) & Little Saints (Pre-K)**

St. Timothy's School offers reasonably priced child care before and after school.

Children Preschool through 5th grade can join us  
beginning at 6:30 am until school starts and after school until 6:00pm.

Breakfast is served from 7:40- 8:00 am.

Late start days are 7:00-10:00 am, breakfast is served 7:40-8:00am.  
If your child has breakfast, pricing will be applied to your lunch account.

We have flexible schedules that allow you to have a set schedule, or drop in before and after school childcare. NO more rushing or being late, your child/children will be enjoying activities with friends supervised by caring Catholic staff in a creative, safe, self exploration environment.

**Pricing;** \$3.00 per hour, rounded to the nearest 15 mins, (.75 for every 15 minutes). You will automatically be billed through Sycamore and will receive a statement monthly.

If you would like to register your child/ren for our Extended Day program please fill out the form attached to this sheet and send it back to school. Keep this sheet for your reference.

Registrations must be turned in before children can attend our extended day program.

To contact:

Please email us at [saintsclub@stimml.org](mailto:saintsclub@stimml.org)

or

call the school at  
(320) 963-3417

# St. Timothy Catholic School

## Extended Day Registration

(Only one per family is needed)

Family Name \_\_\_\_\_

Circle one; Drop-in      Regular schedule-Days \_\_\_\_\_ AM / PM

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

### Emergency Contacts:

First contact: Name: \_\_\_\_\_ Relationship to child \_\_\_\_\_

Phone # \_\_\_\_\_ Cell/Home/Work \_\_\_\_\_

Secondary phone # \_\_\_\_\_ Cell/Home/Work \_\_\_\_\_

Secondary contact: Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

Phone # \_\_\_\_\_ Cell/Home/Work \_\_\_\_\_

Secondary phone # \_\_\_\_\_ Cell/Home/Work \_\_\_\_\_

### Authorized to pick up:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

**Please see additional information on the back of this form.**

**Licensed physician and dentist authorized to give emergency care to my child:**

Physician's Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Dentist's Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone# \_\_\_\_\_

Allergies, Asthma, Seizures, Orthopedic or sensory problems/other special health needs

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**Medications being taken:**

Prescription Medication: \_\_\_\_\_ child \_\_\_\_\_ for? \_\_\_\_\_

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**School Closing Information:**

If school is closed due to weather, Saints' Club will remain open for one hour after school is dismissed. The hourly rate will be applied.

**In case school were to close early my child(ren) should;**

**Circle one;** Go to Saints Club    Ride the bus    They will be picked up    Call parents for directions

**In signing this, I confirm I have read the Handbook and I understand and agree to the following:**

I understand that in order for my child to attend Saints' Club they must adhere to the behavioral expectations and support staff when asked to do so.

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Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_