

**BLESSED SACRAMENT SCHOOL EXTENDED DAY PROGRAM  
2022-2023 STUDENT REGISTRATION (rev. 02/22)**

Office Use:	_____
Reg. paid	_____
Reg. date	_____

CHILD'S NAME \_\_\_\_\_ CHILD'S SEX \_\_\_\_\_ GRADE \_\_\_\_\_

CHILD'S NICKNAME \_\_\_\_\_ CHILD'S ADDRESS \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

MARITAL STATUS OF PARENTS \_\_\_\_\_

LEGAL CUSTODY OF CHILD \_\_\_\_\_

FATHER'S/GUARDIAN'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_ EMAIL \_\_\_\_\_

PLACE EMPLOYED \_\_\_\_\_ WORK HRS. \_\_\_\_\_ CITY \_\_\_\_\_

HOME # \_\_\_\_\_ WORK # \_\_\_\_\_ CELL # \_\_\_\_\_

MOTHER'S/GUARDIAN'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_ EMAIL \_\_\_\_\_

PLACE EMPLOYED \_\_\_\_\_ WORK HRS. \_\_\_\_\_ CITY \_\_\_\_\_

HOME # \_\_\_\_\_ WORK # \_\_\_\_\_ CELL # \_\_\_\_\_

**EMERGENCY CONTACTS (other than Parents)**

1. NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ DAY # \_\_\_\_\_ EVE. # \_\_\_\_\_ CELL # \_\_\_\_\_

2. NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ DAY # \_\_\_\_\_ EVE. # \_\_\_\_\_ CELL # \_\_\_\_\_

**AUTHORIZED TO PICK UP:**

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

**PERSON(S) NOT AUTHORIZED TO PICK UP:**

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

*Chronic Physical Problems, Allergies/Pertinent Developmental Information/Special Accommodations Needed (note N/A if none apply)*

Name and phone number of child's physician \_\_\_\_\_

OTHER SCHOOL/PROGRAM PRESENTLY ATTENDING: \_\_\_\_\_

PHONE \_\_\_\_\_ GRADE/CLASS \_\_\_\_\_

PREVIOUS SCHOOLS/PROGRAMS ATTENDED: \_\_\_\_\_

DATE & PHONE \_\_\_\_\_

- Appropriate paperwork such as custody papers shall be attached if a parent is not allowed to pick up the child.
- NOTE: Sections 22.1-4.3 of the Code of Virginia states that unless a court order has been issued to the contrary, the noncustodial (OVER)

parent of a student enrolled in a public school or day care center must be included, upon the request of such noncustodial parent, as an emergency contact for events occurring during school or day care activities.

### AGREEMENTS

1. Blessed Sacrament School Extended Day Program (BSEDP) agrees to notify the parent(s)/guardian(s) whenever the child becomes ill and the parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by BSEDP.
2. The parent(s)/guardian(s) authorize BSEDP to obtain immediate medical care if any emergency occurs when the parent(s)/guardian(s) cannot be located immediately.\*\*\*
3. The parent(s)/guardian(s) agree to inform the BSEDP within 24 hours or the next business day after his child or any member of the immediate household has developed a reportable communicable disease, as defined by the State Board of Health, except for life threatening diseases which must be reported immediately.
4. The parent(s)/guardian(s) agree to inform the BSEDP by phone, email, letter, or text whenever anyone other than the usual pick-up person will be picking up the child.

### SIGNATURES

_____	_____
Parent(s) or Guardian(s)	Date
_____	_____
Director of BSEDP	Date

\*\*\*If there is an objection to seeking emergency medical care, a statement should be obtained from the parent(s) or guardian(s) that states the objection and the reason for the objection.

NOTE: (Proof of identity is maintained in the main school records)

Check each period for which you wish to regularly enroll your child. Clearly indicate if Regular use or Occasional Use

- Time period
- Occasional use
- Regular use List what days per week
- 7:00 am - BSC - Regular use (all grades) \_\_\_\_\_
- 8:00 am -\*\*GSECCS BSC Regular use \_\_\_\_\_
- 11:45 am to 3:00 pm - Regular use (Preschool) \_\_\_\_\_
- 1:30 pm to 3:00 pm - Regular use (RB & SS) \_\_\_\_\_
- 3:15 to 6:00 pm - Regular use (\*RB, SS, Sun, K-8 only) \_\_\_\_\_
- "Early Release" Days (Grade School 12pm-3pm) \* \_\_\_\_\_ (GS Wednesdays 2:10pm-3pm) \_\_\_\_\_
- (ECC 11:45-1:30pm only) \* \_\_\_\_\_

\*check which one applies

STARTING DATE \_\_\_\_\_

\* Fuzzy Bear students with approval of the Principal or ECC Director or Ext. Day Director. \*\* Grade School ECC Sibling

Date Child Entered BSEDP: \_\_\_\_\_

Date Child Left BSEDP: \_\_\_\_\_