



ST. FRANCIS BORGIA
CATHOLIC SCHOOL

St. Francis Borgia Childcare is designed to provide supervision and safety for your school-aged children in a Christian setting.

**Our program is open to all school-aged children
3 years old – 8th grade.**

Hours of operation: 7:00am - 6:00pm

Summer hours: 7:30am - 5:30pm

**Fees: \$25.00 Registration fee
 \$5.50 per hour (contracted)
 \$6.00 per hour (un-contracted)**

**For more information, please call
St. Francis Borgia Childcare at 262-377-4990**



ST. FRANCIS BORGIA
CATHOLIC SCHOOL

**ST. FRANCIS BORGIA CHILDCARE
REGISTRATION FORM 2018-2019**

Child's Name _____ Grade (2018-19) _____
Address _____
City/Zip _____
Phone _____ Date of Birth _____

Mother's Name _____
Address _____
City/ Zip _____ Phone _____

Father's Name _____
Address _____
City/ Zip _____ Phone _____

Child resides with (Check one) _____ Both Parents _____ Mother _____ Father

Days/ Sessions/ Times attending (Indicate times on all that apply)

HOURS OF ATTENDANCE

Monday _____ - _____

Tuesday _____ - _____

Wednesday _____ - _____

Thursday _____ - _____

Friday _____ - _____

Please check one:

_____ **CONTRACTED** (Contracted fee will be set for entire semester based on days and times needed)

_____ **UNCONTRACTED** (billed monthly for hours used)

Start Date _____

Parent/Guardian Signature _____ Date _____

Please return this completed form, along with \$25.00 per child registration.

Office use: Date received _____ Reg. Fee: Cash _____ Check # _____



ST. FRANCIS BORGIA
CATHOLIC SCHOOL

ST. FRANCIS BORGIA CHILDCARE EMERGENCY FORM

CHILD'S LAST NAME FIRST NAME MIDDLE

HOME ADDRESS CITY/TOWN ZIP CODE

DATE OF BIRTH SEX HOME PHONE

PARENT/GUARDIAN FATHER: LAST NAME FIRST NAME

MOTHER: LAST NAME FIRST NAME

CHILD RESIDES WITH: FATHER MOTHER BOTH

FATHER'S WORK NUMBER: CELL:

MOTHER'S WORK NUMBER: CELL:

DOCTOR'S NAME: PHONE:

DENTIST'S NAME: PHONE:

HEALTH CONCERNS:

NAME OF PERSON WHO HAS PERMISSION TO PICK UP YOUR CHILD:

NAME: PHONE:

NAME: PHONE:

NAME OF PERSON TO CALL IN CASE OF EMERGENCY(WILL CALL PARENTS FIRST)

NAME: PHONE:

NAME: PHONE:

IF, IN THE JUDGEMENT OF THE CHILDCARE STAFF, EMERGENCY TREATMENT IS REQUIRED, I AUTHORIZE MY CHILD TO BE TRANSPORTED BY AMBULANCE TO A HOSPITAL FOR TREATMENT. I ALSO UNDERSTAND THAT THE AMBULANCE DOES RESERVE THE RIGHT TO CONVEY THE PATIENT TO THE NEAREST CARE HOSPITAL OR THE HOSPITAL OF THEIR CHOICE, SHOULD THEY DEEM NECESSARY. I HEREBY AUTHORIZE THE PHYSICIAN AT THE HOSPITAL TO GIVE EMERGENCY TREATMENT TO MY CHILD.

DATE: SIGNED:



ST. FRANCIS BORGIA
CATHOLIC SCHOOL

ST. FRANCIS BORGIA CHILDCARE TOILETING POLICY

In order to attend St. Francis Borgia Childcare children must be completely toilet trained.

Children must be able to:

- Communicate their need to use the bathroom facility.
- Undress, stand/seat themselves appropriately on the toilet, wipe themselves when finished, and redress.
- Flush the toilet, wash and dry their hands.

If a wetting accident occurs, the child may change themselves. A staff member will direct them into the bathroom with a wipe and their clothes in order to wash and change. If a child has a BM accident a staff member will contact the parent to come and wash and change their child, so that they may remain at childcare.

State licensing and insurance guidelines prohibit extended childcare staff from assisting a child in any toileting responsibilities, washing or changing a child.

I have read and understood the above statement.

Child's Name: _____
(Please print)

Parent/Guardian Signature: _____

Date: _____

Please sign and return to Childcare