

Hampstead School Lunch Program Registration Form

*****All unpaid fees for the 2020/2021 school year must be paid BEFORE registration for the 2021/2022 school year will be accepted.*****

Student Name	Date of Birth	Teacher	Room/Grade

Home Address: _____

Home Phone #: _____

Mother's/Guardian Name: _____

Work Phone #: _____ Cell number#: _____

Email address: _____

Father's/Guardian Name: _____

Work Phone #: _____ Cell number: _____

Email address: _____

Emergency Contact: _____ Phone #: _____

Relationship: _____

Does your child have any medical, physical, or emotional concerns that the Lunch Program supervisors should be aware of?

Please Circle One:

FULL-TIME

CASUAL

Payment Options: Grades 1 to 5

1. Payment in Full by cheque or cash (\$200.00)
2. Monthly payments by cash or cheque (\$20.00/month)
 - a. _____ Payment on the 1st of the month
 - b. _____ Payment on the 20th of the month

CASUAL – I will send \$1.00/stay with my child to school on the days they stay.

Payment Options: Kindergarten

1. Payment in Full by cheque or cash (\$100.00)
2. Monthly payments by cash or cheque (\$10.00/month)
 - a. _____ Payment on the 1st of the month
 - b. _____ Payment on the 20th of the month

3. CASUAL – I will send \$1.00/stay with my child to school on the days they stay.

AGREEMENT

I understand the Hampstead School Lunch Program has agreed to provide lunchroom facilities and supervision for my child/children. I agree to pre-pay for my child/children to attend this USER-PAY facility. I agree that my child/children must cooperate with the Lunch Program supervisors in charge of the program or he/she may lose the privilege of remaining in the program.

IMPORTANT: By signing below, I acknowledge that I have read the registration package and accept the programs expectations, rules and policies. I also confirm that I have reviewed the registration package with my child/ren.

Parents Signature

Date

For more information please contact Hampstead School at 204-654-1818