

2018-19 ENROLLMENT CHECKLIST

Dear Extended Day Parent/Guardian,

Please read the Swampscott Public School Handbook located on the website. After

Printed Name	
Parent/Guardian Signature	Date
In order for the Extended Day Program to be a sunderstand it is important that children, parents policies and procedures. By signing below, I ack by the policies and procedures of Extended Coordinator if I have any question	/guardians follow all the rules, nowledge that I agree to abide Day. I will contact the Site
Acknowledgement of Policies of	and Guidelines
I will agree to inform the Director of Extended Day i advance prior to a program selection change.	n writing at least 60 days in
I will inform the program of any changes as they m (Absences, emergency contacts, release consent, changes allergies, special limitations, and medical conditions)	
I will keep the Program Description and Program Fe	ees for my records.
I have filled out my student/students' enrollment for (To include Enrollment Checklist, Registration, Medical Form	
I agree to follow the Swampscott Public Schools Be Guidelines located in the district student handbook.	havior and Discipline Policies and
I have read the District Student Handbook located understand the rules, policies, and procedures.	on the district website and
I agree to the payment policy and procedures local have made my registration payment of \$100.00 online confirmation.	
I have read and will abide by all the policies and proc	edures of Extended Day.
completing enrollment forms, and agreeing to the folk enrollment.	owing statements to ensure

Please sign and return this form with your enrollment packet.