

Saint Columbkille Catholic School: Crusader Care Form - Out of School Day

Crusader Care will be \$5.00 per hour on out of school days. After the first hour, charges will be made by the quarter hour (\$1.25).

PLEASE PRINT CAREFULLY

Parents Names:	
Crusader Care: Hours: 7:30am-5:30pm	<i>circle the dates you need care:</i> September 7th *Students will need to bring a sack lunch.
Date Form Received	<i>for office use only:</i>

Grade:	Children's Names:	Does this child have an allergy?
		No Yes:
		No Yes:
		No Yes:
		No Yes:

First contact in the event of illness, emergency, or early dismissal should be: Mother___ Father___

	Mother/Guardian	Father/Guardian
Name		
Work Phone		
Cell Phone		
Email Address		

If we cannot reach a parent or guardian, please name *at least two* relatives or friends *who are available during the day and may be called if your child is ill or in the event of an emergency or early dismissal.*

They will be contacted in the order in which they are listed.

	Name	Relationship to Child	Home Phone	Cell Phone
1				
2				