

SAINTS PETER & PAUL CHILD CARE REGISTRATION

110 Central Ave N, PO Box 189, Richmond, MN 56368

CHILD INFORMATION						
Please list names of all your children who will be enrolling at Saints Peter & Paul Child Care.						
Legal Name (Last, First, Middle)	Gender	Birthdate	Current Age	Program		
				Full time daycare, part-time daycare, before and/or after school		

PARENT/GUARDIAN INFORMATION	N			
Parent #1 Name:	Relationsh	Relationship to Child:		
Address:				
Street	City	State	Zip	
Email Address:	Phone:	Phone:		
Employer:	Work Phone:			
Parent #2 Name:	Relationship to Child:			
Address:				
Street	City	State	Zip	
Email Address:	Phone:			
Employer:	Work Phone:			

Please select which option you are registering your

PROGRAM INFORMATION FOR 6 WEEKS TO PRE-KINDERGARTEN (Hours of Operation 6AM-6PM)

- Full Time Infants (6 weeks-16 months)-\$210 per week/\$42 per day
- Full Time Toddler (16 months-33 months)-\$190 per week/\$38 per day
- Full Time Pre-Kindergarten (33 months to Kindergarten)-\$180 per week/\$36 per day

PART-TIME PROGRAM INFORMATION 30 hours a week or less

- Infants (6 weeks-16 months)-\$210 per week/\$42 per day
- Toddler (16 months-33 months)-\$170 per week/\$34 per day
- Full Time Pre-Kindergarten (33 months to Kindergarten)-\$160 per week/\$32 per day



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PROGRAM INFORMATION FOR K-5 ONLY (Hours of Operation 7:00 AM-5:30PM)

- Before School-\$5 per day or full-time (5 days a week)-\$20 per week
- After School-\$12 per day or full-time (5 days a week)-\$55 per week
- Non-school days-\$26 per day (no before or after school care charge)

PROGRAM INFORMATION FOR SAINTS PETER & PAUL SCHOOL PRE-KINDERGARTEN STUDENTS

These child care rates are for children who are enrolled in the Saints Peter & Paul Child Care and the Saints Peter & Paul Pre-Kindergarten.

- \$150 per week for children in the 3 day Saints Peter & Paul School Pre-Kindergarten
- \$160 per week for children in the 2 day Saints Peter & Paul School Pre-Kindergarten

EMERGENCY INFORMATION					
In case that you cannot be reached, please list two emergency contacts:					
Emergency Contact #1:	Phone:				
Address:					
Emergency Contact #2:	Phone:				
Address:					
Family Doctor to call in case of emergency:	Phone:				
Address:					
Family Dentist to call in case of emergency:					
Address:					
In the event of an emergency, Saints Peter & Pa MEDICAL or DENTAL CARE even if the child care parent/guardian. This includes transportation t	ul Child Care is authorized to obtain EMERGENCY is unable to immediately make contact with the o the nearest facility by child care staff or ambulance. Care is authorized to contact any of the individuals				
Parent/Guardian Signature:	Date:				



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PLEASE CHECK THE BOX THAT APPLIES TO YOUR FAMILY.	
☐ Students Enrolled at Saints Peter & Paul School ☐ Members of Saints Peter & Paul Parish ☐ Employee of Coldspring.	
PARENTS MUST COMPLETE ATTACHED IMMUZATION RECORD AND	HEALTH CARE SUMMARY
☐ I give permission for my child(ren) to have their photo taken during purposes like website, Facebook, newspaper, and other public areas. If you do not check this, your child's picture will not be shared outside Care.	
PARENT SIGNATURES	
Parent Name – Print	
Parent Signature	Date
There is a one-time \$50.00 registration fee per child or maximum of \$1	100.00 per family. Fees must be

There is a one-time \$50.00 registration fee per child or maximum of \$100.00 per family. Fees must be turned in with the registration form. Registration fee is waived for Coldspring Employees, Saints Peter & Paul School families, and members of Saints Peter & Paul Parish.

Mail registration form to: Saints Peter & Paul Child Care, PO Box 189, Richmond, MN 56368