

2024-2025 Purely Recreation Registration

August 2024 THROUGH June 2025

Thompson Public School
North Grosvenordale, CT

Student's Name: _____ DOB: _____ Grade: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian #1 Name: _____ DOB: _____

Phone: _____ Place of Employment _____

Work Phone: _____ Work Address _____

Email _____

Parent/Guardian #2 Name: _____ DOB: _____

Phone: _____ Place of Employment _____

Work Phone: _____ Work Address _____

Email: _____

Payments: August payment is due at the time of registration. Each subsequent session, payment is due before the start of each month

(CIRCLE PREFERRED CARE SESSION/SESSIONS)

Morning Care: Five days: \$100.00 Three days: \$80.00

PM Care: Five days: \$190.00 Three days: \$140.00

If you would like to pay for more than one session, credit will be applied to your account.

Please Check what days your child will attend:

Monday____ **Tuesday**____ **Wednesday**____ **Thursday**____ **Friday**____

Office Use Only: \$\$ Collected at Registration: _____ Date Entered: _____