



High School Residential Dorm / After School Program

DH1



Registration Form Academic Year 2019 – 2020

This form is required to be filled out for each MSD student (PLEASE PRINT):

Child's Name: _____

Parent/Guardian Name(s): _____

My child (select only one box):

- Will NOT be staying in the High School Residential Dorm Program at this time. (Skip to Section B)
- Will be staying in the High School Residential Dorm Program. (Go to Section A)

SECTION A – High School Residential Dorm Program*

(*residential students are automatically a part of the After School Program & a one-time fee of \$100 is required)

My child will stay in the dorm (select only one box):

- Full Time (must meet criteria set forth in the Parent/Student Handbook and approved by the Student Life Director).
Please select whether your child will arrive to the dorm on: ___ Sunday or ___ Monday
(all students must follow their county bus schedule, unless the student has prior approval from the Student Life Director)
- Part Time (must meet criteria set forth in the Parent/Student Handbook and approved by the Student Life Director).
Please check which days your child will stay in the dorm:
___ Sunday ___ Monday ___ Tuesday ___ Wednesday ___ Thursday

SECTION B – After School Program

(complete this section only if your child is not staying in the dorm)

My child (select only one box):

- Will NOT be participating in the High School After School Program (ASP) at this time.
- Will be participating in High School After School Program (ASP) upon approval from the Director of ASP. A one-time payment of \$100 is required. Please check which days your child will participate in the High School After School Program: ___ Monday ___ Tuesday ___ Wednesday ___ Thursday

- ❖ No snacks containing **nuts/peanut butter** of any kind are allowed.
- ❖ I understand that the mandatory and non-refundable ASP fee of **\$100.00** is to be paid no later than **September 4, 2019** (check payable to MSD-HSASP). I understand MSD will not admit students without the required forms and fee even on the first day of school. If you have any questions or concerns, please contact the Director of Student Life (Frank Froehle) or the Director of After School Programs (Janna DiBiase).
- ❖ I understand that the High School After School Program is from 2:55pm - 9:00pm, and I am to pick up my child any time before 9:00pm if my child is not staying in the dorm overnight.
- ❖ If your child receives Enhanced Services (ES) during academic hours, registration for Dorm/ASP must first be reviewed by the student's IEP team to determine what support is needed for a successful participation before the child can participate in the dorm and/or the After School Program.

By signing your name, you agree you have read and understand all the items outlined above, and give your child permission to participate in MSD's After School Program.

Signature of Parent/Guardian

Date

For any questions, please contact the Director of Student Life or the Director of After School Programs.

Office of Student Affairs

SHC paperwork done: Yes No

Payment Received: Yes (Amount: \$ _____)

Payment Method: Cash Check: # _____

Date of Payment: ___/___/___