



# 2025-2026 STAR Before and After School Care

## REGISTRATION FORM

Print all information neatly and carefully. **REGISTRATION FORM**  
Space is limited. Registration is open until filled or until the deadline of August 1, 2025, whichever comes first.

Family Name \_\_\_\_\_ Start Date \_\_\_\_\_

Primary Guardian Name \_\_\_\_\_

Primary Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Secondary Phone----- \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**For Your Child's Safety** Please list anyone that **DOES NOT** have authorization to pick up your child, if any:

STAR Registration	GRADE IN 2025/2026	DAYS ATTENDING	Care Location	3 Days BEFORE		3 Days AFTER		5 Days BEFORE		5 Days AFTER	
				Fee	256420	Fee	256420	Fee	256420	Fee	256420
1 <sup>st</sup> STAR Participant Name:  Gender:  Date of Birth:	<input type="checkbox"/> K	AM PM	Frank C Whitely	\$108	A1 <input type="checkbox"/>	\$202	A2 <input type="checkbox"/>	\$158	A4 <input type="checkbox"/>	\$286	A5 <input type="checkbox"/>
	<input type="checkbox"/> 1 <sup>st</sup>	M <input type="checkbox"/> <input type="checkbox"/>	Armstrong	\$102	C1 <input type="checkbox"/>	\$178	C2 <input type="checkbox"/>	\$157	C4 <input type="checkbox"/>	\$266	C5 <input type="checkbox"/>
	<input type="checkbox"/> 2 <sup>nd</sup>	Tu <input type="checkbox"/> <input type="checkbox"/>	Fairview	\$102	D1 <input type="checkbox"/>	\$178	D2 <input type="checkbox"/>	\$157	D4 <input type="checkbox"/>	\$266	D5 <input type="checkbox"/>
	<input type="checkbox"/> 3 <sup>rd</sup>	W <input type="checkbox"/> <input type="checkbox"/>	Lakeview	\$102	E1 <input type="checkbox"/>	\$178	E2 <input type="checkbox"/>	\$157	E4 <input type="checkbox"/>	\$266	E5 <input type="checkbox"/>
	<input type="checkbox"/> 4 <sup>th</sup>	Th <input type="checkbox"/> <input type="checkbox"/>	MacArthur	\$102	F1 <input type="checkbox"/>	\$178	F2 <input type="checkbox"/>	\$157	F4 <input type="checkbox"/>	\$266	F5 <input type="checkbox"/>
	<input type="checkbox"/> 5 <sup>th</sup>	F <input type="checkbox"/> <input type="checkbox"/>	Muir	\$102	H1 <input type="checkbox"/>	\$178	H2 <input type="checkbox"/>	\$157	H4 <input type="checkbox"/>	\$266	H5 <input type="checkbox"/>
	<input type="checkbox"/> 6 <sup>th</sup>		Lincoln Prairie	\$132	I1 <input type="checkbox"/>	\$152	I2 <input type="checkbox"/>	\$221	I4 <input type="checkbox"/>	\$229	I5 <input type="checkbox"/>
2 <sup>nd</sup> STAR Participant Name:  Gender:  Date of Birth: (Receive a 10% discount)	<input type="checkbox"/> K	AM PM	Frank C Whitely	\$108	A1 <input type="checkbox"/>	\$202	A2 <input type="checkbox"/>	\$158	A4 <input type="checkbox"/>	\$266	A5 <input type="checkbox"/>
	<input type="checkbox"/> 1 <sup>st</sup>	M <input type="checkbox"/> <input type="checkbox"/>	Armstrong	\$102	C1 <input type="checkbox"/>	\$178	C2 <input type="checkbox"/>	\$152	C4 <input type="checkbox"/>	\$266	C5 <input type="checkbox"/>
	<input type="checkbox"/> 2 <sup>nd</sup>	Tu <input type="checkbox"/> <input type="checkbox"/>	Fairview	\$102	D1 <input type="checkbox"/>	\$178	D2 <input type="checkbox"/>	\$152	D4 <input type="checkbox"/>	\$266	D5 <input type="checkbox"/>
	<input type="checkbox"/> 3 <sup>rd</sup>	W <input type="checkbox"/> <input type="checkbox"/>	Lakeview	\$102	E1 <input type="checkbox"/>	\$178	E2 <input type="checkbox"/>	\$152	E4 <input type="checkbox"/>	\$266	E5 <input type="checkbox"/>
	<input type="checkbox"/> 4 <sup>th</sup>	Th <input type="checkbox"/> <input type="checkbox"/>	MacArthur	\$102	F1 <input type="checkbox"/>	\$178	F2 <input type="checkbox"/>	\$152	F4 <input type="checkbox"/>	\$266	F5 <input type="checkbox"/>
	<input type="checkbox"/> 5 <sup>th</sup>	F <input type="checkbox"/> <input type="checkbox"/>	Muir	\$102	H1 <input type="checkbox"/>	\$178	H2 <input type="checkbox"/>	\$152	H4 <input type="checkbox"/>	\$266	H5 <input type="checkbox"/>
	<input type="checkbox"/> 6 <sup>th</sup>		Lincoln Prairie	\$132	I1 <input type="checkbox"/>	\$152	I2 <input type="checkbox"/>	\$221	I4 <input type="checkbox"/>	\$229	I5 <input type="checkbox"/>
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	<input type="checkbox"/> 3 <sup>rd</sup>	W <input type="checkbox"/> <input type="checkbox"/>	Lakeview	\$102	E1 <input type="checkbox"/>	\$178	E2 <input type="checkbox"/>	\$152	E4 <input type="checkbox"/>	\$266	E5 <input type="checkbox"/>
	<input type="checkbox"/> 4 <sup>th</sup>	Th <input type="checkbox"/> <input type="checkbox"/>	MacArthur	\$102	F1 <input type="checkbox"/>	\$178	F2 <input type="checkbox"/>	\$152	F4 <input type="checkbox"/>	\$266	F5 <input type="checkbox"/>
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			Lincoln Prairie	\$132	I1 <input type="checkbox"/>	\$152	I2 <input type="checkbox"/>	\$221	I4 <input type="checkbox"/>	\$229	I5 <input type="checkbox"/>
	<input type="checkbox"/> 6 <sup>th</sup>										

**Registration Fee(s) are due at time of enrollment.** Registration Fee: \$50 Per Child.

**Payment:** ☐ Cash Check # \_\_\_\_\_ Credit Card: ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Cardholder Name: \_\_\_\_\_ Last 4 digits of CC on file: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Signature \_\_\_\_\_

Charge Amount: \_\_\_\_\_

