CLUB CTK FAMILY REGISTRATION FORM 2024 - 2025

CHRIST THE KING CATHOLIC SCHOOL 195-B, Room: 002, Brandon Road, Pleasant Hill, CA 94523 Club Phone: (925) 685-0995 Club Email: club@ctkschool.org

FAMILY NAME (Please Print)							
Primary Parent To Contact (Please circle one):	MOTHER	FATHER					
Father's Name				Email			
Father's Contact Numbers: Work			Mobile				
Home Phone			_				
Address	-						
		City			State	Zip	
Mother's Name			_	Email			
Mother's Contact Numbers: Work			Mobile				
Home Phone							
Check if address is same as above	-						
Address	-						
(Leave blank if same as above)		City			State	Zip	
STUDENTS NAME			<u>GRADE</u>		l	BIRTH DATE	
		_					
		_					
One siel Neede en Cine		Laurica Madia	ation Di				_
Special Needs or Circu	imstances (Al	iergies, meaic	cation, Die	et Restr	ictions)		-
							_
							_
FEE SCHEDULE							
Registration (Due with Registration Form)							
\$75 <u>per family one child</u> attending:			Check	#		Date	
\$100 per family two or more children attending:			Check	#		Date	
	****ONLINE	PAYMENT****					
Online Payment Amount:	_		Onlir	le Paym	ent Date: _		
Program (Amount billed per child):	\$8.50/hour		After 6P	M: \$1.00)/minute		