



STCS Summer Enrichment Program Application 2020

208 North 24th Street Olean, New York 14760 Phone (716) 372-8122 Fax (716) 372-6707

Select number of days and circle days of the week that child will attend:

_____ 5 Full Days _____ 3 Full Days (M, T, W, Th, F)
_____ 4 Full Days (M, T, W, Th, F)

Student Name: Last _____ First _____ MI _____ Age _____

Address: _____ City _____ State _____ Zip _____

Date of Birth: _____ Social Security Number: _____ Male Female

School District: _____ Religion/Parish: _____ Ethnicity: _____

Parent Home Phone: _____ Email: _____

Mother/Guardian Name: _____ Employer: _____ Contact Priority: 1st / 2nd

Address: _____ City _____ State _____ Zip _____
(if different from student)

Work Phone Number: _____ Cell: _____

Father/Guardian Name: _____ Employer: _____ Contact Priority: 1st / 2nd

Address: _____ City _____ State _____ Zip _____
(if different from student)

Work Phone Number: _____ Cell: _____

Financially Responsible Party: _____

Financially Responsible Party Address: _____ Phone: _____
(if different from above)

Email: _____

Signature of Parent/Guardian Date

Signature of Parent/Guardian Date

** Please make checks payable to Southern Tier Catholic School
Memo: Summer School Program 2020

Emergency Contact Information:

Physician Name: _____ Phone Number: _____

Daily Medications: _____

Alternative Emergency Contact: Name, phone number, address and relationship of TWO people with WHOM YOU HAVE ARRANGED to take the responsibility of your child/ren in case of any emergency and you cannot be reached:

1: Name: _____ Relationship: _____ Phone #(s) _____

2: Name: _____ Relationship: _____ Phone #(s) _____

Any additional emergency info: _____

PLEASE READ AND RESPOND TO THE FOLLOWING:

In order to participate in the Summer Program, I would need to have aftercare provided from 3:00 - 5:00 on the days my child attends the program at an additional cost of \$7 per day

_____ yes

_____ no

***Financial Aid is not available for this Summer Program. If there are more applicants than space available please note there will be a preference given to 5 full day applicants, as well as currently enrolled STCS students and newly enrolled students who plan to attend in the fall of 2020-2021.**

Please choose a payment option: No spots will be held until full or first partial payment have been made

Total tuition and activities fee paid in full and attached with registration _____

Total tuition and activities fee divided into three payment installments due on April 30, May 15, & May 30, 2020, with the first installment included with registration _____