



SACRED HEART SCHOOL
C.A.R.E.S. Program Application
2017-2018

Student Name

Grade

Full-time (5 days) _____

Part-time _____

Dismissal Time: 2:45 - 4:30 PM _____

4:30 - 6:00 PM _____

If part-time, indicate the days of the week desired:

Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____

Various _____

Parent or Guardian's Name _____

Home Address:

Street City Zip Telephone

Mom Cell/Work Phone: _____

Dad Cell/Work Phone: _____

Email: _____

Attached is my \$25.00 Application fee (per family)