

# CLUB CTK

## FAMILY REGISTRATION FORM 2023 - 2024

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 \_\_\_\_\_

<u>STUDENTS NAME</u>	<u>GRADE</u>	<u>BIRTH DATE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

<b>Special Needs or Circumstances (Allergies, Medication, Diet Restrictions)</b>

**FEE SCHEDULE**

Registration (Due with Registration Form)

**\$75 per family one child attending:**

Check # \_\_\_\_\_

Date \_\_\_\_\_

**\$100 per family two or more children attending:**

Check # \_\_\_\_\_

Date \_\_\_\_\_

Program (Amount billed per child):

\$7.50/hour

After 6PM: \$1.00/minute