

**O.L.A. BSP/ ASP Weekly Registration Form**

1<sup>st</sup> Child's Name \_\_\_\_\_ Grade \_\_\_\_\_

2<sup>nd</sup> Child's Name \_\_\_\_\_ Grade \_\_\_\_\_

3rd Child's Name \_\_\_\_\_ Grade \_\_\_\_\_

4th Child's Name \_\_\_\_\_ Grade \_\_\_\_\_

BSP (check bottom for all that apply)

<b>9/21/20</b>	<b>9/22/20</b>	<b>9/23/20</b>	<b>9/24/20</b>	<b>9/25/20</b>
<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>

ASP (check bottom for all that apply)

<b>9/21/20</b>	<b>9/22/20</b>	<b>9/23/20</b>	<b>9/24/20</b>	<b>9/25/20</b>
<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>

By signing below, I \_\_\_\_\_, agree that we are in understanding of the BSP/ASP procedures and will comply.

Parent/Guardian Signature

\_\_\_\_\_