

Parent/Guardian Information for:

Please list each child you are enrolling in the Elementary After School Program

Father/Guardian Name: _____ Responsible party for payment: Yes No
Street Address: _____ City, State, Zip _____
Home Phone: _____ Cell Phone: _____
Employer: _____ Work Phone: _____
Home email: _____
Work email: _____

Please send emails regarding invoices and statements to my: Home email Work email
Please send emails regarding special notices of school/program closings, special events, etc., to my: Home email Work email
Social Security # _____ Custodial Parent/Guardian Yes No

Mother/Guardian Name: _____ Responsible party for payment: Yes No
Street Address: _____ City, State, Zip _____
Home Phone: _____ Cell Phone: _____
Employer: _____ Work Phone: _____
Home email: _____
Work email: _____

Please send emails regarding invoices and statements to my: Home email Work email
Please send emails regarding special notices of school/program closings, special events, etc., to my: Home email Work email
Social Security # _____ Custodial Parent/Guardian Yes No

I would be interested in:

- Providing a "special interest" activity such as _____
- Providing supervision on a field trip or outing
- Providing snacks one evening
- Volunteering to assist with homework or reading with students:
 Once a month Once a quarter Once during the school year Please specify day of week you'd prefer _____

Transportation

All students must be picked up (if not authorized to walk) by 5:30 pm.

Emergency Contact and Child Release Information:

Please list below the people you authorize to pick up your child from the After School Program. Also, specify the people you authorize as an Emergency Contact — those you trust to pick up and care for your child during an emergency situation, if we are unable to reach you.

Name	Relationship to Student	Phone #	Authorized Emergency Contact
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Parent Handbook Agreement:

This certifies that I have read the Elementary Program Handbook and fully understand the policies stated therein.

Signature of Parent/Guardian _____ Date _____