



21ST CENTURY AFTER SCHOOL REGISTRATION

Student's First Name: _____ Middle _____ Last _____

Gender: _____ Male _____ Female _____
Age _____ Date of Birth _____ Ethnicity _____

Father's Name: _____ Occupation: _____

Father's WORK PHONE: _____ Father's EMPLOYER (optional): _____

Mother's Name: _____ Occupation: _____

Mother's WORK PHONE: _____ Mother's EMPLOYER (optional): _____

Guardian's Name: _____ Occupation: _____

Guardian's WORK PHONE: _____ Guardian's EMPLOYER (optional): _____

Member lives with:
 Mother Grandparent
 Father Other _____
Number in the household: _____

Local Emergency Contact OTHER than Parent:
Name: _____ Phone: _____

Relationship to student: _____

School Information:
School: _____ Grade: _____ Teacher: _____

Persons authorized to pick up student:
Name: _____ Relationship to Student: _____ Phone: _____
Name: _____ Relationship to Student: _____ Phone: _____
Name: _____ Relationship to Student: _____ Phone: _____

I, the undersigned (as a parent or guardian of the participant, a minor), hereby give permission for mutual exchange of information between the 21st Century AfterSchool Program and the school regarding health and safety issues, food program status, immunization records and academic achievement.

Signature: _____

Acknowledgement and Consent: For internal and external use, I acknowledge that the 21st Century AfterSchool Program and/or its sponsors may utilize film, print, and digital images of a student or a family, which may be taken during involvement in the 21st Century AfterSchool Program activities. I consent to such uses & hereby waive all rights to compensation. Initial _____

Transportation: I hereby give my child permission to travel on the 21st Century AfterSchool Program bus for field trips. I understand that if my child is not at the designated pickup site, the 21st Century AfterSchool Program will not be responsible for my child. Initial _____

Medical Information:
Doctor Name: _____ Phone: _____

Serious Health Problems: No _____ Yes _____ If Yes, explain _____

Medications: No _____ Yes _____ If Yes, explain _____

I, the undersigned (as a parent or guardian of the participant, a minor), hereby authorize the staff of the 21st Century AfterSchool Program volunteers, coaches, trainers, supervisors, instructors and drivers as my agents, to consent to medical, surgical, or dental medication and/or treatment. In case of emergency, I hereby authorize treatment and/or care at any hospital or by licensed medical personnel. Staff will NOT medicate children. Parents/guardians are entirely responsible for medications and for personally arranging for or insuring the proper and timely medicating of their child.

Signature: _____

I understand that the Summer School Program is an enrichment program that is Federally funded and is offered free-of-charge to my child and to my family. I also understand that my child must follow the rules listed below.

PROGRAM RULES

1. Respect yourself and others. Fighting will not be tolerated.
2. Use positive language. Foul language or other inappropriate language will not be tolerated.
3. Follow all staff instructions. Remain in the activity area designated by staff.
4. Students must remain with staff members until parent or authorized pick-up person arrives. Any other arrangements for getting students home must be made in advance with the Program Leader. Students must be picked up by 4:00 p.m. Monday -Friday.
5. Students should take pride in themselves and their environment. Strive to keep activity areas clean. Take care of facilities and materials. Students may be charged for damage to building and/or property.

NOTE: THE PROGRAM LEADER MAY, AT ANY TIME, WITHDRAW A STUDENT FROM THE PROGRAM FOR ANY OF THE FOLLOWING REASONS:

- Failure to meet appropriate standards.
- Refusal to follow program procedures and rules.
- Verbal abuse, physical abuse or sexual harassment of students or staff members by student or their parent.
- Being in the wrong place or unauthorized departure from a bus or activity site.
- Consistent late pick up (up to 3).
- Child's needs cannot be met by the program.
- Failure to provide required records.

WE HAVE READ AND AGREE TO FOLLOW THE AFTER SCHOOL PROGRAM RULES.

Student's Signature: _____ Grade: _____

Parent/Guardian Signature: _____ Date: _____

Pick up/drop off

Children must be picked up by parents or approved persons. Individuals not on the approved list will NOT be allowed to pick up students. If a situation occurs where an unapproved person is sent to pick up student(s), they will remain with coordinator/staff at program until parent/guardian can come pick up them up. If modifications need to be made, a new form must be completed and approved before new persons will be allowed to pick up students. LAST MINUTE PHONE CALLS/TEXTS DO NOT COUNT! Please call ahead and request that a new form be sent home to be completed and returned. This is for the safety of students.

*** There will be an allowance of (2) instances of a signed/dated note by parents allowing for a change in pick up on that date that must be turned in upon arrival by parent/student to site coordinator.**

*** There will be an allowance of up to (3) late pick ups of students throughout the course of the Summer Program.**

***Any more than the allotted number of instances will result in corrective action.**

Discipline Procedures and Policies

Terry Public Schools is committed to providing a safe, positive, and structured learning environment for all children in the After-school/Summer Program. Although the After-school/Summer Program is a different setting than the regular school day, appropriate student behavior is still expected. Please review the following rules and consequences that will guide the program.

Rules:

1. Show respect at all times.
2. Move appropriately throughout the building.
3. Follow the instructions set forth by the site coordinator and the After-school Program workers.
4. Refrain from damaging any school property.
5. Refrain from disruptive behavior, fighting, violence of any kind, and inappropriate language.
6. Comply with any and all other regulations set forth by the After-school/Summer Program Director and /or school administrators.

Consequences:

Terry Public Schools After-school/Summer Program will make every effort to communicate with parents when disciplinary action needs to be taken. Please know that all rules will be reviewed with students at the beginning of the Summer Program and the beginning of the school year. It is imperative that both students and parents understand the expectations of the After-school/Summer Programs. As well as the potential consequences. The following page is a copy of the discipline letter that will be sent home if a misbehavior occurs in the After-school/Summer Program. Please note that a first offense will result in a verbal warning and discussion with the student's parents. Second and third offenses will result in a letter and involve a school administrator. These offenses will typically result in a suspension from the program. A total of 3 offenses can result in a permanent dismissal from the After-School/Summer program. School administrators reserve the authority to exercise good judgment and issue a greater or lesser consequence as needed.

Parent/gaurdian signature: _____

Student signature: _____

Date: _____

***Please become familiar with the following After-school/Summer Program Discipline Letter.**

PHOTO RELEASE FORM FOR THE AFTER SCHOOL & SUMMER PROGRAMS

Dear families,

We have a "closed" social media page as a way for us to stay connected with families about our weekly activities. Be advised that your child may be photographed during these various activities in our classroom or during our field trips. Please fill out the form below to indicate whether or not you give your permission for your child to be photographed and have those photos appear on our social media page. Once filled out, please return to the A.S.P/ Summer Program.

_____ YES, I give permission for my child's photograph to be taken and used on our social media page.

_____ NO, I do NOT give permission for my child's photograph to be taken and used on our social media page.

Date: _____

Parent/Gaurdian signature: _____

Student's first and last name: _____