

# Alabama 21<sup>st</sup> Century Community Learning Centers

## Chilton County Children's Club

After School Program 2018-2019

**Student Name:** \_\_\_\_\_ Pathway 1 \_\_\_\_\_ Pathway 2 \_\_\_\_\_

Grade: \_\_\_\_\_ School: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Ethnicity: \_\_\_\_\_ Limited English: \_\_\_ Yes \_\_\_ No

Student's Address: \_\_\_\_\_

Mother/Guardian Name: \_\_\_\_\_ Cell: \_\_\_\_\_

Mother Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Father/Guardian Name: \_\_\_\_\_ Cell: \_\_\_\_\_

Father Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Additional Contact Information:

Name and phone # of the persons to call in an emergency (other than parents):

Name \_\_\_\_\_ Phone# \_\_\_\_\_ Relation \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Relation \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Relation \_\_\_\_\_

The following individuals are **not allowed** to have contact with my child:

Name: \_\_\_\_\_

Name: \_\_\_\_\_ Court Order on file: Yes \_\_\_\_\_ No \_\_\_\_\_

### Medical Information:

I give permission for the Chilton County Children's Club and/or YMCA to obtain emergency medical treatment, including emergency transportation, for my child if I cannot be reached immediately. I agree to be responsible for any emergency medical expenses incurred.

**Parent's Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

Student Medical Conditions: \_\_\_\_\_ Student Allergies: \_\_\_\_\_

Student Medications: \_\_\_\_\_

Special Needs: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Accident Insurance: \_\_\_\_\_ Policy Holder: \_\_\_\_\_

Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

### YMCA Information:

Membership: Yes \_\_\_\_\_ No \_\_\_\_\_ Family \_\_\_\_\_ Single \_\_\_\_\_

Will tuition be covered by Family Guidance? \_\_\_ yes \_\_\_ no

Circle Days participating in YMCA activities: Monday Tuesday Wednesday Thursday Friday

Tuition will be charged monthly at a rate of \$70 per child for Pathway 1 and \$85 per child for Pathway 2. **All Pre-K students are Pathway 1.** Families with two children will be charged \$140 for Pathway 1 and \$170 for Pathway 2. Families with more than two children will pay an additional \$20 monthly per child. All tuition is due by the 10<sup>th</sup> of each month. A \$10 late fee will be assessed after the tenth of each month. Dismissal time will be 5:30 for Pathway 1 at CES and 5:45-6:30 for Pathway 2 at the YMCA (not available for Pre-k students). Any child still present ten minutes after pickup time will be considered late pickup. Three late pickups may result in your child being excused from the program.

I give permission for my child to be included in after school program photographs and videos. Yes \_\_\_\_\_ No \_\_\_\_\_

**Parent's Signature** \_\_\_\_\_ Date \_\_\_\_\_

Activities away from the CCCC, CES or YMCA afterschool: YES NO	Signature of Parent/Guardian	Date
Transportation provided by the CCCC, CES, or YMCA afterschool: YES NO	Signature of Parent/Guardian	Date

Child's first day of attendance: \_\_\_\_\_ Child's withdrawal date: \_\_\_\_\_