



After School Skate Program ENROLLMENT PACKET

Parent and Child Information

Parent/Guardian First Name: _____ Last Name: _____

Cell: _____ Work: _____ Home: _____

Email Address: _____

Home Address: _____

City, State and Zip code: _____

Parent/Guardian First Name: _____ Last Name: _____

Cell: _____ Work: _____ Home: _____

Email Address: _____

Home Address: _____

City, State and Zip code: _____

Child's Full Name: _____ Date of Birth: _____

Medical Information:

Doctor's Name: _____

Doctor Phone: _____

Address: _____ City, Zip Code: _____

Check which applies:

- My child is in good health and able to participate in the program without restrictions.
- My child has some limitations. I have included these on the special care information page.

PARENT: _____ CHILD: _____

Special Care Information

Please list any special care information that your child may have such as allergies, existing illness, previous serious illnesses, injuries and hospitalizations in the last 12 months, any medication prescribed for long term continuous use, and any information which we should be aware of:

Allergies: _____

Food Allergies (We do not serve a snack, but there could be a food allergy to something available for purchase): _____

Existing or previous serious illness: _____

Injuries or hospitalizations in last 12 months: _____

Medication prescribed for long term continuous use: _____

Other information we should be aware of: _____

ADDITIONAL NOTES:



After School Skate Program

POLICY ACKNOWLEDGMENT AND AUTHORIZATION PAGE

PARENT: _____

CHILD: _____

1. **I have received a Parent Handbook.**

2. **Facility Hours:** The after school program is open Monday through Friday from 2:30pm to 6:00 pm including extended hours for early release and school holidays. A late pickup fee of \$15 is charged after 6:15pm, and again after 6:30pm. After two (2) late pickups your child may be expelled from the program. There are designated Holidays when the facility is closed listed in the Parent Handbook.

3. **Promotional photos and videos:** I hereby authorize photos or videos to be used for marketing and promotional purposes in print or electronically.

4. **Program Fees:**

\$ 75.00 One Time Registration Fee
\$ 55.00 Per week, while school is in session
Plus \$15 per day for full day, teacher workday, school holiday
\$ 15.00 Tardy fee for pickup after 6:15pm
\$ 15.00 Additional Tardy fee for pickup after 6:30pm
\$ 10.00 Late Payment fee if weekly program not paid by Monday

5. **Payment Times:** Payment is due weekly, (Every Monday) in advance. Payment is required to reserve your child's enrollment even if your child is absent for the entire week. If you have acquired a fee due to late pickup, it must be paid in full with your next week's payment. If payment is not made by Tuesday of the current week an additional late fee will be charged. We accept cash, debit or credit cards for payment.

6. **Registration Form Acknowledgment:** *I confirm that all of the information provided in this Enrollment Packet is complete and accurate to the best of my knowledge. I agree to update my information if anything changes. I understand the above policies and agree to these standards.*

(Signature of Parent or Guardian)

(Today's Date)