

SRC Afterschool Program REGISTRATION PACKET 2023-2024

Child's Name: _____

Date of Birth: _____ Age _____ 2023-2024 Grade _____

Parent/Guardian 1: _____

Address: _____ Home Phone Number: _____

Email: _____

Cell Phone: _____ Work Phone: _____

Parent/Guardian 2: _____

Address: _____ Home Phone Number: _____

Email: _____

Cell Phone: _____ Work Phone: _____

EMERGENCY CONTACT INFORMATION

If both parents/guardians listed on this form are unable to be reached in the case of an emergency, please list 2 alternate contact people and phone numbers.

Contact #1: _____ **Phone:** _____

Contact #2: _____ **Phone:** _____

Physical Health

Any food or environmental allergies? Any dietary restrictions?

Past or present health problems? (Asthma, headaches, seizure disorder, etc.)

Is there any other information you would like to share about your child's health or behavior?

Personality

What are some key phrases to use for redirection and effective behavior strategies?

What comforts your child? What things help calm them down when they are upset?

Does your child have any fears or sensitivities that we should be aware of? _____

What are your child's high interest areas? _____

SNACK POLICY

Is it important to send your child to the After School Program with a healthy snack.

Parents/guardians agree to send their child(ren) with a snack to ASP.

Parents are welcome & encouraged to drop off snacks to be stored at the Rec Center for their child. If children continually arrive without a snack parents will be called and asked to bring in food for their child.

Parent/Guardian Signature

Date

Authorization to Release & Sign In/Out Procedure SRC Afterschool Program 2023-2024

Child's Name: _____

The following person(s) is authorized to pick up my child from The SRC Afterschool Program:

Name	Relationship	Phone #
1.		
2.		
3.		
4.		

Check one and please specify details below:

_____ I will sign in and sign out my child daily.

Or

_____ My child's procedure for sign in is:

My child's procedure for sign out is:

Parent/Guardian Signature

DATE

FINANCIAL AGREEMENT

I hereby promise to fulfill the financial obligations as they are described below in order that my child, _____, is enrolled in the SRC After School Program 2023-2024. I understand that I may be asked to contribute additional fees for special events that are beyond the fees listed below.

MEMBERSHIP FEES

The After School Program requires children to have an individual or family membership, a children's punch pass (10 visits for \$30) or pay a day-pass fee of \$8. **No backdating will be permitted on fees or memberships.** It is the parents' responsibility to know when their child's membership or punch pass expires. Staff, when able, will attempt to inform a parent when their child's membership is expired or nearing the expiration date, parents must make payment in a timely manner to continue to have their children attend the SRC After School Program.

NO LATE PICK-UP

If your child is picked-up more than 10 minutes beyond program hours parents/guardians will be charged \$10 for each incident.

REFUND POLICY

If your child must terminate their participation in the After School Program or if they have an emergency prolonged absence, you may write a letter of request to the Skagway Recreation Center Director. Refunds will be considered on a case-by-case basis and will follow the standard refund policy of the Skagway Recreation Center found in the Membership Agreement Waiver.

DROP-IN RATES

Participants may pay for an \$8 day pass to attend the After School Program. **All paperwork must be on file and payment received beforehand for the child to attend.** Payments must be received on or before the day of attendance.

I HAVE READ AND UNDERSTAND THE FINANCIAL AGREEMENT. I agree to the terms of the SRC After School Program Financial Agreement. If I have any concerns, I will promptly address the Skagway Recreation Director.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date