

# 2024-2025

# Summit Creek Academy After-School Registration Form

# **Childs Information**

Childs name (first/middle/last)		Name called		
Address	City		_Zip	
Birth Date/ Grade Te	acher			
School				
Check all that apply to your child, or check	"None" for the	ose that don't app	ly:	
Allergies (type)			None	
ADDADHD				
Medication (type and schedule)			None	
Emotionally, behaviorally, intellectually o	or physically cl	nallenged	None	
Special circumstances/Requests (explai	n)			
Fan	nily Informa	tion		
Mother/guardians name		Employer		
Home address	City	State	Zip	
Home #Work#	Ext	Cell #		
E-mail address				
Father/guardian's name		_Employer		
Home addressCit	·Y	State	Zip	
Home #Work#	Ext	Cell #		
E-mail address				

#### **Emergency Information**

In the co	ase of emerg	ency, please contact the follo	owing first:		
MotI	her/guardiar	n Father/guardian			
Childs do	octor		Phone #	!	
Childs dentist			Phone #	:	
Hospital	preference <sub>-</sub>				
Insurance company		Policy #	!		
		Emergency Contacts	s /Authorize	ed Pickups:	
1. N	ame		Relationship	to child	
Н	ome #	Work #	ext	Mobile #	
2. N	ame		Relationship	to child	
Н	ome #	Work #	ext	Mobile #	
3. N	ame		Relationship to child		
Н	ome #	Work #	ext	Mobile #	
He	ow did you h	near about Drop-N-Play?			

### Important information for you to know:

- 1. The weekly tuition of \$ 70.00, includes all early release days. The weekly tuition is due regardless of the number of days a student attends during the week, and must be paid even when a student is absent the entire week.
- 2. After-school program is not available when schools are closed for holidays or inclement weather, however the extended all-day program may be available.
- 3. All after-school participants will be given a snack upon their arrival to the center.
- 4. Students will have daily "homework time", not to exceed 1 hour. Please note that Drop-N-Play is a homework first program, if your child does not have homework they should have a book or other educational material with them.
- 5. **Drop-N-Play does** <u>NOT</u> allow cell phones at any time during the afterschool program. Our staff will be happy to allow your child to call his/her parents on our phones when necessary.
- 6. Payments are due each Friday <u>prior</u> to the upcoming school week, a \$15.00/week late fee will be charged for payments made after the weekly due date. Parents or guardians may make as many advance weekly payments as they choose. Weekly payments will be auto drafted each Friday. Parents will be denied service if weekly payments are not paid on time. A late fee of \$1.00 per minute, per child is charged for each minute a child remains after 6:pm.
- 7. Two weeks written notice must be submitted prior to any child's withdraw from the afterschool program.

Parent Signature	<del>)</del>	
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# Medical Information/Release

Name of Family Physician:	Phone #	
responsible for any costs. Parents will be co do not administer medications under any choice to provide emergency care in the	eatment, 911 will be called. Should an ambulance be needed, parents will be ntacted as soon as possible after contacting 911. Drop -N- Play INC, employee ircumstances. I agree that Drop-N-Play INC, may authorize a physician of their event neither I nor our family physician can be reached immediately. I certify m dition and has no medical, psychological, or mental condition which has not a registration form.	
· ·	read the above carefully, fully understand the content and consequences of th bound by the above policies and procedures and release.	is
Parent/Guardian Signature:	Date:	
I, on behalf of myself, my spouse, and each release all rights, causes of action and cla loss, expense, damage or injury suffered boungingence of Drop –N- Play INC, but exclusionsideration including but not limited to labeled consideration including but not limited to labeled child/children for \$10.00 and other valuabinjury to persons and damage to property temporary childcare for my children at my the use of the center. I have been given a safe and satisfactory for my child. I also have a satisfaction regarding any and all aspects Guidelines. By signing this Release, I have a employees other than those contained in	A child designated on the registration form (my "child"), hereby waive and an against Drop –N- Play, its Officers, Directors, Agents, and Employees, for any my child during the time my child is visiting Drop –N- Play, including the possible ding gross negligence and intentional misconduct. For good and valuable enefits realized from the utilizing Drop –N- Play as a drop-in center for my econsideration. I understand that the provision of child care contains risk of and that by signing this release I engage Drop –N- Play INC, to provide own risk. I further understand that there is an assumption of risk associated with a opportunity to inspect the premises of Drop –N- Play INC, and found that it is the been given the opportunity to ask questions and obtain answers to my of Drop –N- Play LLC, and this Release. I have received a copy of Drop –N- Play INC, or its viritten information (Guidelines) supplied to me by Drop –N- Play INC. I understand and will continue in effect for this and any future visits my child may make the	's nd
•	ive read the above carefully, fully understand the content and consequences of be bound by the above policies and procedures and release.	)f
Parent/Guardian Signature:	Date:	