



# AfterCare Program

## Registration for After School Child Care – School Year 2023-2024

Hours of Operation: Monday – Friday 3:00pm – 5:30pm (when school is in session)

**(This form must be completed and returned with enrollment packet if you might need to use our AfterCare Program)**

### FAMILY INFORMATION

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Child's Grade \_\_\_\_\_ Child's Teacher \_\_\_\_\_

Ethnic Designation: American Indian \_\_\_\_\_ Asian \_\_\_\_\_ Bi-racial \_\_\_\_\_ Black \_\_\_\_\_ Hawaiian \_\_\_\_\_ Hispanic \_\_\_\_\_ White \_\_\_\_\_

### **Please check the box below to indicate who has legal custody:**

Father/Guardian's Name \_\_\_\_\_ Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Mother/Guardian's Name \_\_\_\_\_ Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Father's Workplace \_\_\_\_\_ Work Phone \_\_\_\_\_ Workday Ends \_\_\_\_\_

Mother's Workplace \_\_\_\_\_ Work Phone \_\_\_\_\_ Workday Ends \_\_\_\_\_

Father's Cell Phone \_\_\_\_\_ Email \_\_\_\_\_ Mother's Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

### **In case of emergency when parent/guardian cannot be reached, the individuals below may be called and/or authorized to pick up:**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Relationship \_\_\_\_\_

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Relationship \_\_\_\_\_

Family Physician \_\_\_\_\_ Phone \_\_\_\_\_

Child's Allergies \_\_\_\_\_

Medical Conditions \_\_\_\_\_

Special instructions \_\_\_\_\_

### **My child may be released to the following persons (Please attach additional information if necessary. Identification will be required):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

My child may **NOT** be released to the following individual(s) (WE CANNOT STOP A PARENT FROM PICKING UP THEIR CHILD UNLESS WE HAVE LEGAL DOCUMENTATION STATING OTHERWISE): \_\_\_\_\_

1. In case of an emergency involving your child, it is the policy of NHCA to give first aid treatment while contacting parent/guardian for further instructions. In the event that parent/guardian cannot be contacted, school officials will contact 911.
2. Information on this form may be shared with appropriate NHCA personnel.
3. A late fee will be charged to parents/guardians who are late picking up their child/children. If at the end of the AfterCare program day your child has not been picked up and you or your emergency contact designee cannot be reached, your child will no longer participate in AfterCare.
4. Payments are due with monthly tuition. Late payments may jeopardize the child's continued participation in the AfterCare Program.

\_\_\_\_\_  
Parent/Guardian Signature #1                      Date

\_\_\_\_\_  
Parent/Guardian Signature #2                      Date