



After-School Registration 2016-2017

Child's Name: _____
Last Name First Name Membership No.

Date of Birth: ____/____/____ Age: _____ Grade (Entering in fall): _____

School Attending: _____ Bus transportation: Yes No

Home Address: _____

City: _____ Zip: _____

Mother's Name: _____ Email: _____

Business Phone: _____ Home Phone: _____

Cellular: _____

Father's Name: _____ Email: _____

Business Phone: _____ Home Phone: _____

Cellular: _____

Pick-up Password (you select): _____

Number of days per week (circle one): 5 days 4 days 3 days 2 days

Days of the week attending (circle): Monday Tuesday Wednesday Thursday Friday

In case of emergency, if parent is not available, the JCC may call:

Name: _____

Phone: _____ Relationship: _____

Allergies/Medical Conditions: _____

Is your child currently receiving an I.E.P.? Yes No

Please list those authorized to pick up your child:

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

I have read and understand the policies below and agree to adhere to these policies as stated.

- I give permission to have my child(ren) utilize the transportation services of the David Posnack Jewish Community Center's After-school program. _____
INITIALS DATE
- The JCC reserves the right to refuse services to any family whose after-school and membership accounts are in arrears.
- The JCC reserves the right to cancel the transportation service of any student whose behavior or influence is deemed unsatisfactory and not in the best interest of the JCC's After-school program.
- The JCC reserves the right to cancel after-school services to anyone who continually fails to notify the JCC & the bus company when his/her child will not need to be picked up from school.
- I understand the program ends at 6 p.m. except on specified holidays (listed in after-school calendar). I have made emergency pick-up arrangements should I be late. I am still responsible at time of pick-up for a \$15.00 charge per child for each 5 minutes (s)he remains after registered pick-up time. The JCC reserves the right to cancel after-school services of any family whose child is not picked up by closing time more than 3 times. If you are late and have not called the After-school program, the JCC reserves the right to call the Davie Police Department 15 minutes after the After-school program closes to report child abandonment.
- I understand that in case of emergency and I am unable to be contacted, I give permission to the David Posnack JCC to have my child transported to the closest hospital for treatment. This does not in anyway hold the JCC financially responsible for any medical or emergency care given.
- My child is in good health and physical condition, and I give permission for my child to participate in all program activities in-house/on-campus and including off-campus field trips.
- I understand that there are no fee reductions for holidays, illnesses or emergency closings (see monthly fee schedule).
- I give permission for the JCC to use photographs/slides/videos/DVDs/CDs taken of my child for publicity purposes in all media including the website and social media.
- I understand that the JCC is not responsible for any electronic devices brought to the after- school program. _____
INITIALS DATE

Parent/Guardian Signature _____ Date _____