

The Island School



After-School
Application for Enrollment

Student Information:

Date of Birth: _____ Sex: _____
Grade: _____

Child's Full Name: _____
Last First Middle

Child's Physical Address: _____

Child's Mailing Address: _____
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**Family Information**

**Child Lives With:** \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Employer: \_\_\_\_\_ Employer: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email address: \_\_\_\_\_ Email address: \_\_\_\_\_  
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Medical Information:

I hereby grant permission for the staff of this facility to contact the following medical personnel to obtain emergency medical care if needed.

Doctor: _____ Phone: _____

Hospital Preference: _____

Please list allergies, special medical or dietary needs, or other areas of concern:

Helpful Information About Child:

Contacts:

Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident, or emergency, if for some reason the parent or legal guardian cannot be contacted.

Name	Cell#	Other#

STAFF INCIDENT MANAGEMENT

Keeping children actively involved in meaningful, fun activities generally creates an environment in which problems are few and minor. However, when program guidelines are not followed, staff will use the following behavior/incident guidelines.

- Behavior/Incident Guidelines: Appropriate behavior from every child is expected. Each child will be treated fairly, firmly, and removed from the activity if necessary.
- When a behavior/incident problem occurs:
 1. The staff will handle the problem initially. Techniques such as redirecting, discussing the problem, reviewing guidelines, loss of privileges and or have their parents notified.
 2. A behavior/incident report may be filled out for the parent to review and sign. All behavior/incident reports will be kept in your child's file.
 3. If the problem continues, staff reserves the right to suspend or expel any child without a refund.
 4. Any physical contact with another child will result in a suspension from the program. We have a zero tolerance for physical contact.

Parent Signature

Date

PROGRAM GUIDELINES FOR THE CHILD

We have developed a set of basic guidelines for all children to follow. Please review these guidelines with your child. Other guidelines / rules have been developed for certain areas of the facility and will be gone over with your child.

- Keep hands and feet to yourself (**No physical contact**)
- Listen, follow directions and be respectful of staff.
- Be respectful to others and their property.
- Refrain from profanity and obscene gestures.
- Respect the indoor and outdoor equipment.
- Use “inside voices” when indoors.
- Only leave the program area with permission from staff.
- Personal Devices are not permitted.
- Toys from home are not permitted.

Parent or Guardian Signature

Date

Parent/Guardian Agreement Form

I have read and will abide by all After- School Program policies.

Parent/Guardian Signature

Date

AUTHORIZATION FOR EMERGENCY TREATMENT

Permission for the Director, Acting Director, or The Head of School to take whatever steps may be necessary for medical care in case of an emergency is hereby given. I understand the order of actions taken will follow the outline below unless there is a need for immediate action, but will not be limited to these actions:

1. Parent or guardian will be called
2. Child's physician will be called
3. Contact person parents have listed will be called
4. If none of these efforts are successful:
 - a. Another physician will be called
 - b. An ambulance will be called
 - c. The child will be taken to the emergency room of _____ accompanied by a staff member.

Signed: _____
(Parent or guardian)

Date: _____

Witness Signature: _____

Date: _____

The Island School Programs Participant Waiver Form

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK FOR THE ISLAND SCHOOL PROGRAMS/ACTIVITIES PLEASE READ THIS FORM CAREFULLY and be aware that in signing up and participating in The Island School's program/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with The Island School's programs/activities. I acknowledge that there may be certain risk involved in participating in program activities, and I voluntarily agree to assume the full risk of any injuries, damages or loss, that my minor child/ward or I may sustain of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have as a result of participating in such program/activity against The Island School, including their respective officials, employees or volunteers (hereinafter referred to as "Parties"). I do hereby fully release and forever discharge the parties from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/wars and arising out of, connected with, or in any way associated with these programs/activities. I indemnify and hold harmless The Island School, any or its employees from any and all claims from my use of county property or participation in any of The Island School's programs. I will further indemnify and "hold Harmless" The Island School and its employees from all costs, expenses and liabilities resulting from any claim brought from my child's use of county property and/or participation in programs to the extent of The Island School liability under general law. This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above and for myself, my heirs, assigns, and my minor child(ren)'s involvement or participation in the program as provided above. I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims.

Parent/Guardian Signature

Date

After School Program Fees

Payment Options for the 2021-2022 School year

After School hours are 3:00-5:30pm (*Late Fees will be enforced*)

Please circle the option below that you are choosing for your child(ren) for the entirety of the 2019-2020 school year and return to school.

- 1.) Pay in full by August 10, 2021: \$900.00 per child
- 2.) 5 installments of \$180.00 per child due on or before:
 - August 10, 2021
 - September 1, 2021
 - October 1, 2021
 - November 1, 2021
 - December 1, 2021

There will be a \$10.00 late fee per child if fees are not paid on or before due dates.

- 3.) Drop in fee: \$10.00 a day per child due **on that day.**

There will be a \$3.00 late fee per child if fee is not paid on the day of use of After School

***Paperwork must be completed before your child may attend The After School Program, or Fun Days.**

Parent's Signature

Date