Family Center After-School Programming Registration Form and Behavior Contract

A form for each student participating must be filled out completely and returned to the Elementary Office or Family Center.

Student's Name: _____ Grade/Teacher:_____Date of Birth: _____

Parent/Guardian: _____Program: PM Power Learners

Street Address: _____Town: _____Zip Code: _____Township: _____

Day Phone:_____ Evening Phone: _____

Circle which school your child attends: Remer Longville **MUST INDICATE**

I give permission for the Northland Area Family Service Center and Northland Community Schools to exchange information.

YES_____ NO_____ Please initial your response.

Health Concerns

Medications: YES NO If yes, what medications and how often: _____
Seizures/Convulsions: YES NO Explain: _____
Allergies to foods, medicine, bee stings, etc. YES NO Explain: _____
Physical or other limitations: YES NO Explain: _____

Emergency Contacts **(MUST LIST 2 OTHER than yourself or spouse)**

1) _____Day Time Phone _____

2)_____Day Time Phone _____

Medical Transportation: I give permission for my child to be transported to the nearest medical facility for treatment in the event of any accident or injury.
Print Name: _____ Signature: _____Date:_____

Transportation Home: For the safety of your child, please indicate who will be responsible for picking up your child, if your child will walk home or take the activity bus:

_____

Photo Release: *My child's photo may be used for future brochures, newspaper articles or newsletters.* YES NO **(MUST indicate)**

THE FOLLOWING BEHAVIOR CONTRACT MUST BE SIGNED BY STUDENT AND PARENT:

1. Students must follow directions and show cooperation.
2. Students must show respect for themselves, others (students & adults), and their environment.
3. Participation in the program is a privilege. When one student's behavior disrupts the group, or makes it difficult for other participants, the student's parent will be called to pick up their child and may not be able to attend future functions. If the parent cannot be reached, we will contact the emergency contacts to pick up the student.
4. **First Behavior Disruption:** a call or note sent home to parent/guardian by program staff.
   Second Behavior Disruption: a letter sent home to the parent/guardian from Northland Area Family Service Center
   Third Behavior Disruption: child will not be able to attend any Family Center programming for at least one month. If there is a waiting list, the student's name will be placed at the end of the waiting list.
5. Parents/Guardians are responsible for picking up their children on time. Family Center staff cannot transport children.
6. Bus rules must be followed or parents will be called immediately to pick up their children.

Student Contract:
I agree to follow the rules set forth by the Northland Area Family Center. I will show respect to staff and others by cooperating and following the rules. Failure to follow the rules will mean immediate removal from the activity.

X _____ X _____
Student's Signature Parent/Guardian Signature Date

Please call the Northland Area Family Center with questions at 566-2779.