

Youth Club Registration Form

• Cost: Sept- Dec: \$350; Jan-June: \$350 Drop In: \$15 a day

• Second Child \$250 per semester: Drop In: \$10 day

• Financial Assistance Available

Child's Name:		Age:	Date of Birth://
Grade:	Name of Teacher:		<u> </u>
Does your child have any	y medical conditions, allergies, etc.	we should be aware of?	Yes: No:
If you checked "Yes," ple	ease explain:		
(Attach additional sheets if neces:	sary. If your child requires medication while atte	ending, please contact us for a Permi	ssion to Administer Medication form.)
Parent/Guardian II	nfo:		
Parent/Guardian #1:			
Work Ph#:	Cell Ph#:	Home	Ph#:
Place of Employment:		Ph#:	
Home Mailing Address_			
Home Physical Address ((if different):		
Day Time Email:			
Parent/Guardian #2:			
Work Ph#:	Cell Ph#:	Homr I	Ph#:
Place of Employment:		Ph#:	
Home Mailing Address_			
Home Physical Address ((if different):		
Day Time Email:			
Email Address:			

Emergency Contacts:					
Emergency Contact #1:		Relationship to Chil	d:		
Daytime Ph#:	Cell Ph#:				
Does this person have your permissi	ion to pick your child up from Y	outh Club? Yes:			
Emergency Contact #2:		Relationship to Chil	d:		
Daytime Ph#:	Cell Ph#:				
Does this person have your permissi	ion to pick your child up from Y	outh Club? Yes:			
Transportation:					
Note: The Neighborhood House provide bus is also periodically utilized to assist in Children also have the option to walk (unbus).	in brief "field trips" to different loc	ations around town during n	ormal prograi	m hours.	
Please Check All that Apply:					
My Child Should Ride the Bus	to NHH My Child	Can Walk to NHH (Unsupe	ervised) If The	ey Choo	se
to notify their teacher of the same. the MDES main office ASAP, in addi			ason, you sh	ould also	o notify
Waivers & Release: I hereby grant permission for my child to active games, outdoor activities, occasio well as those program-related activities Acknowledging that such risks exist, I he House, respective directors, officers, ago property damage my child may suffer w	onal off-site field trips, etc. I under s not listed, my expose him/her to l ereby waive, release, absolve, inde gents, volunteers, and employees fi	rstand that my child's partici known danger as well as una emnify and agree to hold har	pation in thes nticipated risk mless The Nei	e activitions. S. ghborhoo	es, as od
Name (Printed):			_ Date:	/	_/
Signature:			_		
Photo/Video Release I grant The Neighborhood House permis Club and/or related programs and activi understand that The Neighborhood Hou associate my child's last name without of	ission use photographic images and vities for promotion, publicity, and/ use may associate my child's first n	d/or video recorded during m or commercial purposes (we name with the aforemention	ebsite, email, p	orint, etc.	.). I
Signature:					