Boys & Girls Club of Little Chute Elementary
ENROLLMENT FORM

BOYS & GIRLS CLUBS OF THE FOX VALLEY

Unit Director: Ross Mortensen **Email**: rmortensen@bgclubfoxvalley.org **Phone**: 920-788-7610 ext. 6156

Site Registration Information: **Please complete the form below. Answer each question to the best of your knowledge. If you have any questions, please feel free to contact the school site director using the contact information listed above. Thank you!**

Is your child a current Club Member?

YES or NO

Does your child have siblings currently in program?

YES or NO

***If yes, please fill out name below ***

_____ _____

LAST ***FIRST***

Child's Name:

_____ _____

LAST ***FIRST***

Grade *(2015-16 School Year):* _____

I would like my child to attend
(circle all that apply):

Before School (7:00 AM – 8:00 AM)

After School (3:10 PM – 6:00 PM)

I would like to have my child attend on the following days:
(circle all that apply):

Mon. Tue. Wed. Thur. Fri.

I plan to have my child attend the Before/After school program during these months of the school year
(circle all that apply):

September October November December January February March April May

*****After School Program Only*****

I plan to have my child attend After School programming until at LEAST 5:00 PM most days? *(Circle One)* ***YES or NO***

Parent/Guardian Authorizations: **Please read through the following statements and initial by each one. Also, sign/date at the bottom to give your authorization and acknowledge your understanding.**

1). I authorize school personnel and Boys & Girls Club staff to exchange information about my child on a need-to-know basis. I understand the purpose of exchanging information such as grades, homework assignments, behavior and/or attitudes displayed by my child is to assist my child. *Initial* _____

2). I understand that all information given on this form is confidential and is only used as a guide to understand my child. *Initial* _____

3). I understand it is my responsibility to notify staff if my child will be absent from the program for a long period of time. Failure to do so may result in termination of club membership. *Initial* _____

4) I understand failure to use the program on days specified above, may result in termination from membership at the Little Chute Elementary Boys & Girls Club. *Initial* _____

5). I understand that to complete the registration process, a non-refundable registration fee of $15 per student (or $35 per family) *Initial* _____ *(Registration Fee is not due until Membership is accepted)*

6.) I understand that I am not guaranteed a spot for my child and that there are limited spots available. *Initial* _____

By signing and dating below, I acknowledge that I have read and understood the information on this form. I also acknowledge that the information provided is to the best of my knowledge at this time.

_____ _____ _____

Parent/Guardian Signature *Date* *Contact Phone Number*

**** Please indicate your preferred choice to be notified of enrollment verification by providing either email or resident address ****

Email:_____ Address:_____