

SAGINAW TOWNSHIP COMMUNITY EDUCATION 2023-2024 AFTER SCHOOL ACTIVITY CLUB
Child Information Record & Parent/Guardian Consent and Agreement

Student's School: _____ Grade: _____ Teacher: _____

Student Last Name: _____ First: _____ Middle: _____ Date: _____

Street Address: _____ Apt: _____

City: _____ State: _____ Zip Code: _____ Birth Date: _____

Primary Phone: _____ Gender: Male Female Race _____

2nd Phone: _____ If OK, Phone Number for texting: _____

Allergies, Special Needs and/or Special Instructions? Yes No If yes, please explain (add additional sheets if needed)

Please PRINT All information PARENT INFORMATION - Please List Each Parent/Guardian Separately

Parent/Guardian #1 Child primarily resides at this address

Name _____
First Middle Last

Marital Status: Married Divorced Single Widowed

Phone #1 (____) _____

Phone #2 (____) _____

Email Address _____

Employer (if applicable) _____

Parent/Guardian #2 Child primarily resides at this address

Name _____
First Middle Last

Marital Status: Married Divorced Single Widowed

Phone #1 (____) _____

Phone #2 (____) _____

Email Address _____

Employer (if applicable) _____

Please Print all Information

EMERGENCY CONTACTS (Other than Parent/Guardian)
NOTE: Students will only be released to a parent, guardian, or emergency contact person listed.

Name _____ Relationship _____ Phone _____ Cell Phone _____

Name _____ Relationship _____ Phone _____ Cell Phone _____

Name _____ Relationship _____ Phone _____ Cell Phone _____

CODE WORD (to be used if a person not listed is asked to pick up the child): _____

List any allergies: List allergies or notate with "no know allergies" or "None" (please do not leave blank)

AFTER SCHOOL ACTIVITY CLUB'S HANDBOOK

I agree that I have read and reviewed the handbook as provided to me in the Registration Packet and that I will abide by the rules and policies as set forth in the handbook.

EMERGENCY TREATMENT

I give permission to the ASAC, licensed by the Department of Health and Human Services, to secure emergency medical treatment for the named minor child while in care.

REPORTING AN ABSENCE

I understand that I must call the ASAC center to report an absence when my child is scheduled to attend. A \$10 fee can be charged if additional staff time is required to locate my child.

TURNING IN SCHEDULES

I understand schedules/payments must be turned in for each child at each individual center. Child(ren) cannot attend without a schedule and payment. If a child comes to the program without a schedule, the parent/guardian will be called to come and pick up the child(ren).

HEALTH AND IMMUNIZATIONS

I confirm that my **child is in good health** and have notated above any activity restrictions. I also confirm that my **child's immunizations are up-to-date** (or a waiver is on file at my child's school).

INFORMATION CHANGES

I understand it is my responsibility to notify ASAC staff of any changes in family and/or emergency information notated on the Child Information form. Children will not be released to someone not listed.

CREDITS / REFUNDS / ABSENCES

I understand that there is a daily charge based upon scheduled days, not attendance, and there are no credits or refunds for absences. EZ-Passes are available for flexible scheduling and EDI Passes for emergency situations (Call Community Education for details).

SCHEDULES & PAYMENTS

I understand that paper schedules/payments are due each week no later than 6 pm each Thursday. Paper schedules and payments turned in after 6 pm on Thursday will incur a \$20 late fee. Online scheduling is also available (see the center Director for details).

LATE PICK UP POLICY

I understand that the ASAC closes each day at 6 pm and a late pickup will incur a late fee of \$15 for every 10 minutes BEGINNING AT 6:01 PM.

SCHOOL BUILDING DOOR ACCESS

I understand that Door access to all the ASAC centers are locked and accessible by a door-bell type setup. Press the doorbell button to alert staff.

Parent Notification of the Licensing Notebook

All child care centers must maintain a licensing notebook which includes all licensing inspection reports, special investigation reports, and all related Corrective Action Plans (CAP). The notebook must include all reports issued and CAPs developed on and after May 27, 2010 until the license is closed.

- The center maintains a licensing notebook of all licensing inspection reports, special investigation reports, and all related corrective action plans.
- The notebook will be available to parents for review during regular business hours.
- Licensing inspection and special investigation reports from at least the past two years are available on the Bureau of Children and Adult Licensing website at: www.michigan.gov/michildcare.

Playground Consent

The Michigan Department of Health and Human Services, Office of Child Day Care Licensing has established new criteria for playground and playground equipment. A public (school or park) playground is not required to meet all the same playground safety regulations licensed centers are required to meet. Given this information, in order for a child who is enrolled in a licensed program within a school approved by Michigan Department of Education to play on the equipment, the parent must give their consent. If you choose not to give your child permission to play on the equipment, they will still be taken outdoors with the other children and will be offered an alternative activity.

I have read all of the above permissions and by signing below, I agree to all of the items checked.

SIGNATURE OF PARENT OR GUARDIAN _____ **DATE** _____