



ALL-STAR KIDS

Prices reflect check or debit payments. 3% added for credit card payments.

Registration \$50

Date Paid _____

AFTER SCHOOL REGISTRATION FORM

Child's Name _____

Birthdate _____

Age years _____

Female _____

Male _____

Child Resides with _____

Both Parents _____

Mother _____

Father _____

Other _____

Mother's Name: _____

Father's Name: _____

Address: _____

Address: _____

City/State/Zip: _____

CityState/Zip: _____

Res. Phone: _____

Cell: _____

Res. Phone: _____

Cell: _____

Employer's Name: _____

Employer's Name: _____

Occupation: _____

Occupation: _____

Email Address: _____

Email Address: _____

School Name: _____ Grade: _____ Teacher Name: _____

**\$90/ week - Aftercare – Pierce Hammock – Frontier – Acreage Pines – Golden Grove
(circle school)**

\$100/week – Before and Aftercare – Acreage Pines

No school days (\$40/day - if enrolled in aftercare)

No School – Camp \$220/ week - \$180/3 Days - \$150/ 2 days

In Case of emergency, persons authorized to pick up your child from the facility, when you cannot be reached:

Name _____ Address _____ Phone _____ Relation _____

Name _____ Address _____ Phone _____ Relation _____

Child's Physician _____ Phone _____

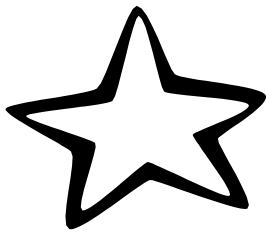
Hospital Preference _____ Phone _____

Any Medical Condition that we should be aware of? _____

In Case of accident or serious illness, I request the school to contact me. If the school is unable to contact my physician or any of the emergency numbers listed, we authorize the school administration to make whatever arrangements are necessary.

Parent's Signature _____ Date: _____

Witness: _____



ALL-STAR KIDS

PARENT AGREEMENT

As the parent (or guardian) of _____, I have carefully read, understand and will abide by the rules and regulations listed below:

1. TUITION

Tuition is due in advance of period covered, therefore all tuition will be paid on Friday for the following week. A late fee will be charged if not paid by Tuesday. Tuition is due regardless of attendance and holidays. If your child does not attend any portion of a calendar week M-F a vacation tuition equal to one-half of tuition rate will be charged. Registration fees are to accompany the application papers and will not be refunded.

2. HOLIDAYS

ALL-STAR KIDS will be closed on the following days:

- | | |
|-----------------|--------------------------|
| *New Year's Day | *Thanksgiving Day |
| *Memorial Day | *4 th of July |
| *Labor Day | *Christmas Day |

*If the holiday falls on a Saturday, school will be closed on Friday, if it falls on a Sunday, school be closed on Monday. HOLIDAYS DO NOT REDUCE TUITION.

3. SECURITY – DROP OFF / PICK UP

Parents are required to sign in upon arrival and sign out upon departure.

4. MEDIA RELEASE

If my child is a participant in a newspaper or TV article, you have my permission to identify and use his/her name.

5. “KNOW YOUR CHILD CARE CENTER”

I have received and read a copy of the “Know Your Child Care Center” pamphlet (Chapter 402.3125 F.S.)

6. ALTERNATE NUTRITION PLAN

The facility agrees to provide nutritious: Mid-morning and Mid-Afternoon Snacks. The parent agrees to provide a nutritious: Lunch and Drink (in non-glass container). Parent has received a copy of the USDA nutritional guidelines. WE DO NOT WARM UP FOOD. If you want you child's food warm, please use a thermos. I have carefully read and understand the USDA nutritional guidelines brochure. I understand that it is my responsibility to provide a nutritious lunch for my child every day.

7. PARENT HANDBOOK

I have received and read the “All-Star Kids 2” Parent Handbook and agree to abide by its policies. We understand that the school reserves the right to dismiss any students who do not cooperate, or whose parents do not cooperate with the educational process or school policies.

8. LATE PICK UP FEE

Parents agree to pick up children at the agreed upon pick up time as indicated on the Enrollment Form. A Late Stay Fee will be charged at the rate of \$1.00 per one (1) minute interval per child.

We understand that ALL-STAR KIDS has an open door policy and we can visit our child at any time.

Parent's Signatures(s):

X _____ Date: _____