

SPARK CLUBS
School Year 2018-2019

Student Name: _____ **Grade:** _____ **Teacher:** _____

Age: _____ **DOB:** _____ **Gender:** _____

I understand and give permission for my child (named above) to:

- Attend field trips offered by Springdale Park After School Clubs.
- I understand that regular school rules also applies to the after school clubs. I also understand that if my child does not follow the rules, then he/she can be removed from the after school club for the remainder of the year.
- Springdale Park's After School Clubs has permission to use pictures of my child during activities for local media sources as well as posting on the website for the purpose of sharing program information with the community.
- I understand that if I do not pick up my child at the end of the club meeting sessions, I will release/pick-up at The Club After School given space permitting. The Club After School's drop-in fee is \$25 and due at the time of pickup.

Signature of Parent or Legal Guardian **Printed name of Parent or Guardian** **Date**

My child will be picked up by: _____

Relationship to child: _____ **Contact Number:** _____

EMERGENCY CONTACT INFORMATION

Parent(s)/Guardian(s)

Name(s)

City State Zip

Phone Numbers Phone Type
(Home, Mobile, etc.)

Phone Numbers	Phone Type (Home, Mobile, etc.)

Parent(s)/Guardian(s) Email address(es)

Best Email address(es) to reach Parent(s)/ Guardian(s)

Students will be selected on a first come basis. You must contact and receive confirmation directly from your SPARK Club.

Club Option 1: _____
Club Option 2: _____
Club Option 3: _____