

River Mill Before and After School Registration Form

2023 - 2024

Child's Last Name: _____ First Name: _____

Address: _____

Birthdate: _____ Gender: _____ Grade: _____ Teacher: _____

Food Allergies: _____

Mother/Guardian	Father/Guardian
Name:	Name:
Address: (if different than child's)	Address: (if different than child's)
Home phone:	Home phone:
Cell phone:	Cell phone:
Work phone:	Work phone:
Email:	Email:
Mother's date of birth:	Father's date of birth:

***If you will be sharing joint financial responsibility, please call Angela Upchurch in the front office (336) 229-0909 to discuss details.**

Check the type of care you request, and the days needed:

Before School Only After School Only Before and After School

3 Days per week 5 days per week

Start Date _____

Continued on Back...

I authorize River Mill Academy to release my child to the following adults:

Name:
Relationship:
Phone #s:
Is this an emergency contact? Yes or No

Name:
Relationship:
Phone #s:
Is this an emergency contact? Yes or No

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Relationship:
Phone #s:
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Name:
Relationship:
Phone #s:
Is this an emergency contact? Yes or No

Emergency Authorization

I give permission for River Mill Academy Before & After School Care staff to authorize emergency treatment and transportation of my child, _____ to Alamance Regional Medical Center.

Parent Signature: _____ Date: _____

Participation and Payment Agreement

My child and I have read, discussed, and agree to abide by the rules, regulations, and payment schedule for attending River Mill Academy Before & After School Care program.

1. **All fees must be paid in advance.**
2. **Each family must pay a non-refundable \$50 registration fee.**
3. A late fee of \$10.00 per week will be assessed for every week that payment is late.
4. If you are more than two (2) weeks behind in payment, your child will be removed from the program.
5. The afterschool program ends at 6:00 pm. A late pick-up fee of \$2.00 per minute will be assessed after 6:10 pm. This fee is due at the time of pickup.

Parent Signature: _____ Date: _____