Application for Tigers Den Afterschool Program
2022-2023

_____ Morning care only _____ Afternoon care only _____ Both morning & afternoon _____ Drop-in
_____ WCPS Employee _____ **Pickup Restrictions** _____ **Medical Restrictions**

Child's Name	Date of Birth	Male or Female Circle One	Grade	Teacher

1. _____ _____
Mother/Guardian (if allowed to pick up child) Email

_____ _____ _____
Cell Phone Work Number Address including city and zip code

2. _____ _____
Father/Guardian (if allowed to pick up child) Email

_____ _____ _____
Cell Phone Work Number Address including city and zip code

Please list the names and phone numbers of individuals authorized to pick up your child from TIGERS DEN Afterschool Program (other than parent/guardians listed above). Students will not be released to anyone not listed below. A valid picture ID must be provided at checkout. Additional names may be listed on the back. Please notify directors of any changes during the school year.

Emergency Contact: _____ Phone Number: _____

Additional Pick-Up: _____ Phone Number: _____

Please list anyone who **MAY NOT** pick up your child from the TIGERS DEN Afterschool Program. **(A copy of custodial records must be on file in our office)**

_____

If your child has **any special needs** due to allergies, diet, medical, etc., please list below. (Use back if needed.)

_____

Please initial after reviewing each item below:

_____ I understand that the Afterschool Program is not a licensed childcare facility. I also understand the program is not required to be licensed by the Georgia Department of Early Care and Learning and this program is exempt from state licensure requirements.

_____ I understand that the Afterschool Program will operate only on days when Walton County Public Schools are in session. The program will **NOT** operate during any break, teacher workday, or any other day when school is not in session.

_____ I understand that if school is dismissed early due to inclement weather, the Afterschool Program will **NOT** be in session and students will be dismissed as indicated in the school registration packet.

_____ I understand it is my responsibility to maintain an up to date account balance or my child will not be allowed to attend the program.

_____ I understand my child may be dismissed for discipline infractions, or at the discretion of the school administration.

_____ I understand that parents must walk students into the building to sign in.

_____ My child HAS permission to watch a PG movie during Afterschool.

Students will adhere to the Walton County Public Schools Code of Conduct while attending the TIGERS DEN Afterschool Program. I, the parent/guardian of the above named student, will assume liability for accidents and injuries incurred during the Afterschool Program. **In the event of an emergency, I authorize the person(s) in charge to seek immediate medical attention for my child.**

Parent/Guardian Signature: _____ Date: _____