ATTENTION: Please download and save this form before completing it. If the form is filled out in the browser, the information entered will be lost.



Dear Parent/Guardian,

Enclosed you will find the **2020-2021** Waltham Boys & Girls Club's School Day Learning Center. Please review the packet making sure all forms have been completed and signed before submitting.

All Parents MUST review the School Day Learning Center Guide, COVID-19 Safety Protocol, and Parent Handbook prior to registration.

## Your application will NOT be accepted until all forms are complete and signed.

-Child's Enrollment Form
-First Aid & Emergency Medical Care Consent Form
-Current Physical and Immunization History
-Medication Consent Form (*if applicable*) Please ask for this form
-Individual Health Care Form (*if applicable*) Please ask for this form
-Tuition Policies
-Oral Health Waiver
-School Information Release

Thank you, The Waltham Boys and Girls Club Team

Our Management can be contacted at:

Aubree Cecil	acecil@walthambgc.org
Ashleigh St. Peter	astpeter@walthambgc.org
Chris Pagan	cpagan@walthambgc.org
Cheryl Wiggins	cwiggins@walthambgc.org
Erica Young	eyoung@walthambgc.org

# 2020-2021 Waltham Boys & Girls Club ENROLLMENT FORM Child Information

Child's Name:	Date of Birth:			
Age at Admission:	Date of Applying: G		Ge	nder:
Home Address:				
Languages in Order of Profic				
Who does the child live with				
Parent/Guardian Informatio	on			
Name:		_ Relations	ship to Child:	
Home Address:				
Primary Phone Number:				
Email Address:				
Parent/Guardian Informatio	on			
Name:		_ Relations	hip to Child:	
Home Address:				
Primary Phone Number:				
Email Address:				
Additional Information				
Current School:			Grade:	
<b>Demographic Information</b> Number of people in housel Housing: Rent Own F	hold:		Foster Home	
Annual household income: E	0		31-23,850	
\$29,451-\$34,200 \$3	4,201-\$40,890	\$40,89	91-\$49,000	\$49,001-\$56,000
\$56,001-\$64,750 \$6	4,751-\$73,000	\$73,00	01-\$78,900	\$78,901-\$84,750
\$84,751-\$90,600 \$9	0,601-\$100,000	Over		_
Does your child receive:	Reduced Price L	unch.	Free Lunch	Neither

Parent/Guardian Signature

Date (valid for one year)

I certify that documentation of physical examination and immunizations is in accordance with public school health and public health requirements and lead poisoning screening. These documents are on file at my child's school.

Parent/Guardian initials:\_\_\_\_\_

Please attach the most recent physical and immunization record along with this completed application.

## 2020-2021 Waltham Boys & Girls Club FIRST AID & EMERGENCY MEDICAL CARE CONSENT FORM

Date of Birth:

I authorize staff in the child care program w give my child first aid/CPR when appropriate	ho are trained in the basics of first aid/CPR to e. I understand that every effort will be made to quiring medical attention for my child. However, e Waltham Boys & Girls Club to contact		
Physician Information			
Child's Physician and Practice Name:			
	Phone Number:		
Please list preferred hospital in case of eme	rgency:		
Medical Information			
Child's Allergies:			
Chronic Health Conditions:			
Medications:			
	on site with an Individual Health Care Plan and		
	e received from a Program Director and requires		
Doctor's signature.			
Are there any custody agreements, court or the child we should know about to best pro-			
Please contact a Program Director to inform us on t			
pertaining legal agreement(s). Contact information			
Emergency Contact(s)			
Primary Contact Name:	Relationship to Child:		
Address:			
Primary Phone Number:	Secondary Phone Number:		
Secondary Contact Name:	Relationship to Child:		
Address:			
Primary Phone Number:			
Tertiary Phone Number:	Relationship to Child:		
Address:			
	_ Secondary Phone Number:		

Child's Name:

## 2020-2021 Waltham Boys & Girls Club AUTHORIZED PICK UP LIST

Child's Name:

My child is allowed to leave the program by:

Parent/Gaurdian Pick Up

\_\_\_\_\_Sign Self Out of Program to:

Take Public Transportation

Take Private Transportation

Walk Home

Another Parental/Gaurdian Approved Method

Please list all authorized adults your child can be released to. To secure your child's safety, staff may ask to see valid photo Id. Please inform all authorized adults to have a valid photo Id when picking up.

1. Name:
2. Name:
3. Name:
4. Name:
5. Name:
6. Name:
7. Name:
I agree these individuals have permission to pick up my child and have the program release my child
into their care.
If this information changes I will contact a Program Director immediately to add or remove people from

this list.

Parent/Guardian Signature

Date (valid for one year)

### 2020-Waltham Boys & Girls Club Policies

Please initial the following statements after you read them.

### **TUITION COLLECTION AND PROCEDURES**

Tuition is due on a weekly basis. If your payment is not received by Friday, service may be suspended. If service is suspended and action is not taken to rectify the financial situation, the Waltham Boys & Girls Club reserves the right to terminate your child's enrollment and fill the slot with a waiting list candidate.

If the child/ren are absent from the program, fees are still due for missed days. There is also a charge for any approval closures authorized by EEC.

A two-week notice in writing is required to withdraw. Parents are also responsible for payments during those two weeks.

## CHECK-OUT/LATE PICK-UP FEES AND POLICIES

All children must be picked up by the end of the designated drop off time block. If a child has not been picked up by closing time, a telephone call will is made to the parent/guardian. If the parent/guardian cannot be reached at utilizing all known contact numbers, emergency contacts will be called. If contact is made, then we will ask the emergency contact to come to the program to pick up your child/ren. If contact has not been made with the parent/guardian or emergency person, the designated Waltham Boys & Girls Club's staff will call the Department of Children and Family (DCF) Emergency Unit or the police station. Report of the action will be placed in the child's file.

A \$1.00 per minute minute per child will be charged for late pick up.

Contact needs to be made with the program if the child will be absent.

I have received, reviewed, and agree to the information in the School Day Learning Center Guide, COVID-19 Safety Protocol, and Parent Handbook

I have read the above and agree with the policies and procedures as stated above:

#### 2020-2021 Waltham Boys & Girls Club Oral Health Non-Participation Form

In January 2010, EEC issued new regulations for child care programs that include a requirement that educators assist children with brushing their teeth if children are in care for more than four hours or if children have a meal while in care [606 CMR 7.11(11) (d)].

#### This regulation is intended to:

- Help children learn about the importance of good oral health
- Provide information and resources regarding good oral health to child care programs and families
- Help address the high incidence of tooth decay among young children in
- Massachusetts, which is associated with numerous health risks.

EEC licensed programs must comply with this regulation. However, parents may choose that their child(ren) not participate in tooth brushing while present at the child care program.

You do NOT need to fill out this form to have your child(ren) participate in tooth brushing while they are in child care. However, if you do not want your child to brush his or her teeth while s/he is attending the child care program, please fill out the information found below. A separate form must be filled out for each child in care. This form must be renewed annually and will be kept in your child's record at the program. Should you change your mind and wish for your child to participate in tooth brushing, this form may be withdrawn at any time by requesting in writing that it be removed from your child's file.

Thank you, The Waltham Boys and Girl's Club

## I do not wish to have my child participate in tooth brushing while in care at the Waltham Boys & Girls Club

Child's Name:

Parent/Guardian Signature

Date (valid for one year)

If you have any questions or concerns, please contact anyone from management listed on page one

### 2020-2021 Waltham Boys & Girls Club School Information Release

I give my permission to the Waltham Boys & Girls Clubs and my child's school to exchange information regarding my child. Information that will be shared may include the information provided on this membership application form, school records involving student progress, behavior, and attendance, and other information collected by Waltham Boys & Girls Club and the School Department, including data collected via surveys or tests. The purpose of this exchange is to help both organizations do a better job of helping students be successful in school and out of school. This release is valid for one year and may be revoked by contacting my child's school in writing.

Child's Name:	
School Child Attends:	Grade:
Teacher's Name:	
Individual Education Plan (IEP) Yes No	
Parent/Guardian Signature	Date (valid for one year)