

St. Paul Lutheran School Kingdom Kids after School Club
Registration Form 2022-2023

Child's Name _____ Grade in School _____

Child's Name _____ Grade in School _____

Child's Name _____ Grade in School _____

Child's Name _____ Grade in School _____

Registered for: _____ Full-time _____ Drop-In

Notes: _____

Medical Information/Statement:

Please list all known allergies, medical conditions, medications, or any other information that the Kingdom Kids After School Club staff needs to be aware of:

Parent/Guardian Information

Parent/Guardian Name _____ Cell # _____

Parent/Guardian Name _____ Cell # _____

Parent/Guardian Name _____ Cell # _____

Parent/Guardian Name _____ Cell # _____

Student Release Policy

Students must be clocked in and out each day!

Only authorized adults (names listed on the registration form) will be allowed to pick up the child. The Kingdom Kids Club staff must be notified in advance by the parent/guardian if there is another adult picking up a child that day. Proper identification will be required in such instances before we release the child. We reserve the right to not let any child go with any person due to any uncertainty; the parent/guardian will be notified of this.

If a parent is not allowed to pick up a child, a copy of the court order must be on file with St. Paul Lutheran School office and the Kingdom Kids After School Club staff. We reserve the right to not let any child go with any person due to any uncertainty, the parent/guardian will be notified of this.

Authorized Adults for Pick-Up:

Name _____	Cell # _____
Name _____	Cell # _____
Name _____	Cell # _____
Name _____	Cell # _____

Kingdom Kids After School Club Handbook Acknowledgement Form

My signature below acknowledges that all pertinent information, phone numbers, and family contact information is on file at St. Paul Lutheran School on the St. Paul Lutheran School Kingdom Kids After School Club Registration Form. I give St. Paul Lutheran School permission to copy this form and any pertinent records needed for the St. Paul Kingdom Kids After School Club. My signature below acknowledges that my child's immunization record is on file at St. Paul Lutheran School or a copy has been given along with my St. Paul Lutheran School Kingdom Kids After School Club Registration Form.. My signature below acknowledges that all of my children's immunizations are up to date and current. My signature below authorizes St. Paul Lutheran School Kingdom Kids After School Club to make arrangements for and to obtain medical care and emergency medical treatment if needed for my child. My signature below acknowledges that I have read, understand, and agree to the conditions and criteria outlined in the St. Paul Lutheran School Parent-Student Handbook, Section "Kingdom Kids After School Club" and that I will abide by the same.

*_____ **I give my consent for my child to be photographed and/or videotaped while participating in the program.***

Parent/Guardian Signature

Date