



# Afterschool Enrollment Contract

5670 Camden Ave.  
San Jose, CA 95124

## Student Information

Program Start Date \_\_\_\_\_

Name First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ Nickname \_\_\_\_\_

Home Address Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Male  Female Date of Birth \_\_\_\_\_ Home Phone \_\_\_\_\_ Social Security No. \_\_\_\_\_

Current School \_\_\_\_\_ School Address \_\_\_\_\_

## Parent Information

Mother's Name First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ Soc. Security No. \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell/ Pager \_\_\_\_\_ Email \_\_\_\_\_

Father's Name First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ Soc. Security No. \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell/ Pager \_\_\_\_\_ Email \_\_\_\_\_

## Emergency Contacts

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Provider \_\_\_\_\_

Policy Number \_\_\_\_\_ Subscriber Name \_\_\_\_\_

List all medical and special conditions such as allergies to food, medicine, etc. \_\_\_\_\_

List all individuals authorized to pick up your child (other than child's parents). Unlisted persons will not be permitted to pick up your child. Identification may be requested from listed individuals.

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**Afterschool Program Selection (8-15-18 – 5-30-19):**  
3 Days\_\_ 4 Days\_\_ 5 Days\_\_ || Grade \_\_\_\_ || Transportation\_\_ || Optional: Debate\_\_ Math Competition\_\_ Chess\_\_

## **Liability Release**

I, the undersigned, in consideration of participation in the programs offered by Champion School's After School Program (the "Program") agree to indemnify and release the program, its officers, staff and employees, from any and all liabilities from any injuries which may be suffered by the above named child, arising out of, or in any way connected with participation in the classes or activities offered by the program. I acknowledge that I have read the above agreement and release, and fully understand that I have assumed all the risks of injury that may occur in the activities offered by the program. I hereby further authorize the program as the agent for the above named child to consent to any medical diagnosis or treatment and hospital care rendered by and under the general supervision and advice of a licensed physician or surgeon in case of accident or illness during a session of any classes or activities offered by the program.

Parent Name \_\_\_\_\_, Date \_\_\_\_\_, Parent Signature \_\_\_\_\_

**Champion Afterschool**  
***Admission Agreement***

I, \_\_\_\_\_, have decided to enroll my child, \_\_\_\_\_, into the Champion After School Program for \_\_\_\_\_ days/week during the \_\_\_\_\_ school year and agree to pay \$\_\_\_\_\_ per month as tuition. I have carefully read and agree to the following.

**Details** (Please initial each line)

- 1 Registration Fee: A nonrefundable fee of \$75 is due with this Registration Form for each new student. \_\_\_\_\_
- 2 Materials Fee: A nonrefundable Materials fee of \$150 (yearly) is due at the time of admission or reregistration for all new and returning students. \_\_\_\_\_
- 3 Sibling Discount: Siblings attending the program are given a 5% discount on monthly tuition.
- 4 If needed, a transportation fee of \$180 per month will be added to each child's fees. \_\_\_\_\_
- 5 Tuition payments: Tuition fees are due on the 1<sup>st</sup> of each month. There will be a late fee of \$25 if the fees are received after the 5th of the month \_\_\_\_\_
- 6 Returned Checks: In the event of returned checks, there will be a \$25 fine per check to be paid with the next month's fees. \_\_\_\_\_
- 7 Short Term Absence: There will be no proration of tuition for absence from the program. \_\_\_\_\_
- 8 December, January Tuition: December, January Tuitions are charged in Full. \_\_\_\_\_
- 9 Short term break A child can be allowed to take a short term break from the program but with a minimum of 1 month notice otherwise the tuition would be charged \_\_\_\_\_
- 10 Champion Afterschool's days of operation, and holidays are listed on the calendar. \_\_\_\_\_
- 11 Sign In/Out: Students may need to be signed in/out daily for school attendance records. \_\_\_\_\_
- 12 Pick-Up: Parents need to pick up their child latest by 6:00 pm Or a late fee of \$2 per minute will be charged every minute after 6:00 pm. \_\_\_\_\_
- 13 Termination of Agreement: Parents need to give a 30 day notice in writing, by the 1<sup>st</sup> of the month, if they would like to withdraw their child from the program or change the enrolled program. \_\_\_\_\_
- 14 Termination/Suspension/Dismiss Champion Program have the right to immediately suspend/dismiss a child for unsatisfactory conduct or disruptive behavior and medical conditions beyond the expertise of the program. \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_