

Navajo's Kids' Club After School Program
2022-2023 Registration Form

Child's Name _____ () M () F

Age _____ Date of Birth _____ Grade _____

Home Address _____

Custodial Parent/Guardian E-Mail (print clearly) _____

Mother's Name _____ Cell Phone _____

Place of Employment _____ Work Phone _____

Father's Name _____ Cell Phone _____

Place of Employment _____ Work Phone _____

Medical Information:

Any medical conditions or allergies that we should be aware of? () Yes () No

If yes, please explain. _____

Is the above name child covered by insurance? () Yes () No

Insurance Company _____ Policy # _____

Physician's Name _____ Phone _____

Permission to seek medical treatment if unable to reach parents/ guardians? () Yes () No

Permission to watch family-oriented PG-rated films? () Yes () No

Permission to play educational games on the internet? () Yes () No

Are there any photo restrictions? () Yes () No

Persons (other than parents) with permission to pick up child or contacted in case of emergency

_____ Cell _____ Work _____

_____ Cell _____ Work _____

_____ Cell _____ Work _____

_____ Cell _____ Work _____

I wish to enroll my child in Navajo's Kids' Club After School Program on the following regularly scheduled days each week. **I understand that fees for these regularly scheduled days are due by Monday of each week, regardless of my child's attendance in the program that week.**

_____ Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday

Parent/Guardian Signature

Date