FUTURE After School Program REGISTRATION/CONSENT 2021-22 (7th and Up)

UNITY CENTER

685 Benton Pike NE, Cleveland, TN 37311

478-1661

PLEASE PRINT CLEARLY

YOUTH NAME	M F
LAST FIRST BIRTHDATE AGE YOUTH PHOTO MAY B	
GRADE entering (Fall 2021) SCHOOL	HOMEROOM TEACHER
YOUTH CELL PHONE ACCEPT TEXTS? YES	S NO YOUTH EMAIL
FACEBOOK? YES NO FACEBOOK NAME INSTAGE	RAM? YES NO INSTAGRAM NAME
STREET ADDRESS	CITY STATE ZIP
PARENT/GUARDIAN NAME	PHONE:
PARENT/GUARDIAN NAME	CELL HOMEPHONE:
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY, OTHER THAN	CELL HOME
NAME	
ADDRESS	
EMERGENCY CONTACT PHONE: CELL HOME	
NAMES <u>AND</u> PHONE NUMBERS OF PERSONS OTHER THAN PARE	ENTS TO WHOM THE CHILD MAY BE RELEASED:
1. 2.	
1. Name Phone Number ALLERGIES/SPECIAL MEDICAL CONDITIONS/MEDICATIONS BEING	
	o
HEALTH INSURANCE COMPANY	
SUBSCRIBER NUMBER	
PHYSICIAN	
 I give my permission for my (our) child to ride the Unity Ce appropriately licensed drivers – in the event that I utilize transporta In the event of an illness or an accident which requires imparent/guardian cannot be reached, I give my permission to David a 	enter/Broad Street UMC buses which are driven by action from school to Unity/ from Unity to home. mediate medical treatment at a time when a

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YOUTH NAME _____ Youth Email Address Youth Cell Phone # DAY(S) TO ATTEND Circle below: Wednesdays Thursdays ALL four days Mondays Tuesdays **EXTRACURRICULAR ACTIVITIES** What extracurricular activities do you plan on participating in this school year (such as sports, clubs, band/choir, or parttime jobs)? _____ During what part of the school year will you be involved in these activities? ____ Fall Semester ____ Spring Semester ____ Fall Sports Season ____ Winter Sports Season ____ Spring Sports Season Will you be participating all 5 days of the week? YES NO If NO, tell us which days you will be participating: _____ **TRANSPORTATION** Due to safety regulations we will not be able to run as many buses this year. We are asking families to pick up their children at Unity Center at the end of the day, if at all possible. A separate Transportation Permission Form is required. PARENT PICK UP: ____ From school to Unity Center ____ From Unity Center to home **BUS PICK UP:** From school to Unity Center (we will let you know if we pick-up at your school) _____ From Unity Center to home (we will let you know if we can drop-off at your home) For your parent/guardian to sign: I (THE PARENT/GUARDIAN) HEREBY GIVE MY PERMISSION FOR UNITY CENTER TO RECEIVE INFORMATION FROM MY CHILD'S TEACHER CONCERNING HIS/HER WORK IN SCHOOL. Youth Name Grade School

PLEASE COMPLETE THE OTHER SIDE

DATE

PARENT/GUARDIAN SIGNATURE