

# Before & After School



The Arena Club's Before & After School program is a licensed program for children kindergarten—eighth grade. Our goal is to create a fun and safe environment everyday after school for children while parents are hard at work! The program includes homework time, snack time, organized field games on our year round indoor field, swimming year round, outdoor play on our fields and playground, center time in our classrooms, field trips on early dismissal days much more! The Arena Club vans pick up from many local schools and it also serves as a bus stop for pick up

## **Before & After Care**

Member: \$369/month

Non-Member: \$409/month

## **After Care Only**

Member: \$279/month

Non-Member: \$319/month

## **Hours of Operation**

\*Before Care starts at 6:45am

\*After Care ends at 6pm

# Registration Form

CHILD'S NAME \_\_\_\_\_ IS THE CHILD A MEMBER? \_\_\_\_\_

SCHOOL \_\_\_\_\_ ENTERING GRADE \_\_\_\_\_ DOB \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL (M) \_\_\_\_\_ (D) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ HOW DID YOU HEAR ABOUT THE PROGRAM \_\_\_\_\_

HEALTH INFORMATION: ARE THERE ANY SPECIAL NEEDS, MEDICAL CONDITIONS, OR BEHAVIORAL CONDITIONS THAT WE NEED TO BE AWARE OF TO ENSURE YOUR CHILD'S SAFETY? CHECK ANY THAT APPLY AND GIVE MORE INFORMATION IF NEEDED.

\_\_\_\_\_ GOOD GENERAL HEALTH

\_\_\_\_\_ SEIZURE

\_\_\_\_\_ ALLERGY, FOOD OR OTHER

\_\_\_\_\_ ASTHMA

\_\_\_\_\_ BEHAVIORAL ISSUE

\_\_\_\_\_ DIABETES

\_\_\_\_\_ MENTAL HEALTH CONDITION

\_\_\_\_\_ PRESCRIPTION MEDICATION

\_\_\_\_\_ OTHER CHRONIC HEALTH CONDITION

\_\_\_\_\_ OTHER MEDICATION

EXPLANATION: \_\_\_\_\_

METHOD OF PAYMENT: \_\_\_\_CASH \_\_\_\_CHECK \_\_\_\_HOUSE \_\_\_\_CREDIT CARD

CREDIT CARD TYPE \_\_\_\_\_ # \_\_\_\_\_ EXP \_\_\_\_\_

I have read and answered to the best of my knowledge, the above questionnaire. I agree that all exercise and activities (including, but not limited to exercise classes, cardio, strength equipment, pools, field activities) here at the club shall be undertaken by me at my sole risk. I release Harford Health & Fitness Club, Inc., its officers, directors, employees and shareholders, from any claim for any injury to me personally, damage to my personal property, or theft thereof, while I am at the Harford Health & Fitness Club, including claims arising from negligence of Harford Health & Fitness Club employees or agents. I understand that I must be a current member in good standing at the time of service to receive member discount. All images taken can be used in all or any future marketing.

\_\_\_\_\_  
Signature/Parent or Legal Guardian must sign if Applicant is Under 18

\_\_\_\_\_  
Date