



## 21st Century Community Learning Centers REGISTRATION FORM

TODAY'S DATE \_\_\_\_\_

For Provider Use Only	Date of Admission	Date of Discharge
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**Instructions:** Unless otherwise indicated, all requested information must be provided. If the information is not known or does not apply, "unknown" or "none" is the required response. A blank field, a line through a field or "N/A" are not acceptable responses

<b>Student's Legal Last Name:</b>	<b>First:</b>	<b>Middle:</b>
<b>Student's Street Address:</b>	<b>City:</b>	<b>Zip:</b>

<b>Grade:</b>	<b>Birth date:</b>	<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Language spoken at home:</b>
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<b>Child's Ethnicity:</b>	Multi-racial specify _____	Other specify _____
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<b>Parent/Legal Guardian Name:</b>	<b>Home/Cell Phone:</b>	<b>Email address:</b>	<b>Employer:Name</b>
<b>Street Address (if different from above)</b>	<b>City:</b>	<b>Zip:</b>	<b>Employer Phone:</b>
<b>Parent/Legal Guardian Name (Optional):</b>	<b>Home/Cell Phone:</b>	<b>Email address:</b>	<b>Employer Name:</b>
<b>Street Address (if different from above)</b>	<b>City:</b>	<b>Zip:</b>	<b>Employer Phone:</b>

**Emergency Contact & Release of Child:** List parents/legal guardians first and then others that may be contacted in an emergency. Include at least one person other than the parents/legal guardians to be contacted and to whom the child may be released.

NAME	PHONE NUMBER	PHONE NUMBER
1.		
2.		
3.		
4.		
5.		

<b>School Attending:</b>
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Transportation option (please select one):  Bus  Pick-Up  Walk (no elementary student may walk home alone)

Bus Drop off address if different from home address: \_\_\_\_\_

My child is in good health:  YES  NO

My child is restricted from:

Allergies, Special Needs and/or Special instructions?  YES  NO If yes, explain:

Will you be providing an Epi Pen:  YES  NO

Will you be providing an Asthma Inhaler:  YES  NO

My child's immunization records can be found on file with my child's school  YES  NO

Child's Physician Name:

Physician's Phone:

Preferred Hospital:

In the event of a serious accident or illness, I give my permission to the ARCH staff, licensed by the Department of Licensing and Regulatory Affairs to secure emergency medical treatment for my student while in their care.

YES  NO

Do you have a restraining order, guardianship papers, or name changes  YES  NO . If yes, please allow the ARCH Site Coordinator to make a copy of such papers for your child's records. Please provide any relevant information.

Throughout the school year and summer, it may be necessary to photograph, video or audio tape your child for education purposes. I hereby grant Kentwood Public Schools ARCH Program permission to copyright, publish, or use any photographs, pictures or likeness, negatives, prints, video tapes, audio tapes, or any reproductions of same included in whole or part, or composite or distorted in character or form, in conjunction with my child's name, or reproductions hereof in color or otherwise, made through any media or art, advertising, internet, television, radio or any other lawful purpose whatsoever. (check one box)  YES  NO

In consideration of participation in any ARCH Program, I do hereby specifically agree to waive any and all claims against, and agree to indemnify, defend, and hold harmless, Kentwood Public Schools, its officers, agents and employees whether permanent, temporary or voluntary for any and all claims for property damage, and/or injury to myself or the minor child or anyone claiming through me or him/her arising in any manner including but not limited to any injuries arising out of any act, or failure to act of the officers, agents, and employees of the ARCH Program. I further specifically assume the risk of any injury in connection with the activities in any ARCH Program.  YES  NO

ARCH will be utilizing current waivers signed by the parent/guardian upon school enrollment for field trips, emergency medical response, photograms/audio/video/taking, and court orders. ARCH will also be utilizing student data such as grades, attendance or discipline provided by the school district for student support and data comparison purposes. I understand that by enrolling my child into a 21st Century Learning Center program, my child will be part of a local and statewide evaluation. This evaluation complies with full confidentiality and "Acceptable Use Policies" of the Kentwood Public Schools. Participation in this research is entirely voluntary and you may choose to withdraw your child from participation at any time. Your child has the right to refuse to answer any particular questions. Your child's name will not be used in any written or published document. Results from the evaluation will be used to fulfill reporting requirements to the State of Michigan and will also be used by staff members to improve the quality of the program.  YES  NO

State of Michigan daycare licensing regulations require us to notify you that care centers operating in school buildings, such as ARCH, shall use school outdoor playgrounds for activities. These school playgrounds may or may not comply with guidelines of the Handbook for Public Playground Safety, PUB No. 325.

**Parenting Notification of the Licensing Notebook Requirement**

**Child Care Organization Act, 1973 Public Act 116**

All child care centers must maintain a licensing notebook which includes all licensing inspection reports, special investigation reports and all related corrective action plans (CAP). The notebook must include all reports issued and CAPs developed on and after May 27, 2010 until the license is closed.

- This center maintains a licensing notebook of all licensing inspection reports, special investigation reports and all related corrective action plans.
- The notebook will be available to parents for review during regular business hours.
- The licensing notebook contains all the licensing inspection and special investigation reports and related corrective action plans for the last 5 years. The licensing notebook is available to parents during regular business hours. Licensing inspection reports, special investigation reports, and corrective action plans from at least the past 3 years are available on the department’s child care licensing website at [www.michigan.gov/michildcare](http://www.michigan.gov/michildcare).

The website where parents can access child care licensing rules is [www.michigan.gov/michildcare](http://www.michigan.gov/michildcare).

Additional comments regarding my child:

Child Tee-Shirt Size:

Please review the Parent Handbook found by accessing this link:

[https://drive.google.com/file/d/1uaEYUQskUnvpDDhma8UZ4rOx5-pUBnyS/view?usp=drive\\_link](https://drive.google.com/file/d/1uaEYUQskUnvpDDhma8UZ4rOx5-pUBnyS/view?usp=drive_link)

My signature below indicates that I understand and agree to all terms listed above. I understand and agree that my electronic signature has the same legal effect as a manual signature. I certify that I accurately completed this form and if anything changes, I will notify the provider by updating this form.



Signature Required  \_\_\_\_\_

Date Card Reviewed	Parent or Legal Guardian Initials	Date Card Reviewed	Parent or Legal Guardian Initials	Date Card Reviewed	Parent or Legal Guardian Initials	Date Card Reviewed	Parent or Legal Guardian Initials

Kentwood Public Schools, together with parents and the community, will educate all students in a safe, secure environment. We are committed to excellence, equity, and diversity in education. Our goal is for each student to master and apply the essential skills to be a successful productive citizen.

The materials have been developed with 21st CCLC funding through a grant awarded by the Michigan Department of Education.