

Give your child the opportunity to grow and develop in a educational and fun setting. Programs are licensed by the state of New Jersey and offer a safe environment with professional staff to meet your child's needs.

*The After School Program is a safe location for children. Cameras are strategically placed around the interior and exterior of the building, as well as a security system at the front door to safely monitor members and guests.*



#### Activities Include

- homework support
- arts & crafts
- physical activities in two gyms & outdoors (when weather permits)
- monthly-themed events—e.g. OLYMPICS which includes: obstacle courses, relay races, hurdles, and much more
- game room
- technology center

A \$245 non-refundable deposit is due at registration for all new members. If your child currently attends the program, a \$65 non-refundable deposit is required. *(These deposits will be applied to your first months tuition)*

These fees include transportation from ALL Wayne Elementary and Middle Schools!

#### PLEASE NOTE:

The After School Program follows the Wayne Public School calendar. We provide transportation on all scheduled early dismissals. The program does not run if school is closed or dismissed early due to inclement weather.

**This is not a school-sponsored activity.**

For more information, please contact Kevin Rebner at (973)-956-0033 or [krebner@bgcnwnj.org](mailto:krebner@bgcnwnj.org)

Drop off or mail registration form, along with one month non-refundable deposit to:  
Boys & Girls Clubs of Northwest New Jersey - Wayne Unit  
153 Garside Ave Wayne, NJ 07470



**BOYS & GIRLS CLUBS**  
OF NORTHWEST NEW JERSEY  
WAYNE UNIT

## After School Program 2018-2019



## When School's Out Clubs Are In!

Boys & Girls Clubs of Northwest New Jersey - Wayne Unit  
2018-2019 After School Program Application

Childs Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Parent Personal Email: \_\_\_\_\_  
School: \_\_\_\_\_  
Grade in September 2018: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

*Child will Attend: M T W Th F*

**Parent/Guardian Information:**

**Mother's Name:** \_\_\_\_\_  
Business Name & Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Business Email: \_\_\_\_\_

**Father's Name:** \_\_\_\_\_  
Business Name & Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Business Email: \_\_\_\_\_

**Marital Status (please check one)**

Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed \_\_\_\_\_ Single \_\_\_\_\_

**People authorized to pick up child:**

**(Please specify if BOTH parents are authorized to pick up)**

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Relation to child: \_\_\_\_\_ Relation to child: \_\_\_\_\_  
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

**Custodial Information:**

If a non-custodial parent is not among those persons authorized to pick up your child, please explain below and attach a copy of the appropriate documents

Childs Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

**Does your child have allergies? Are they allergic to taking any kind of special medication, or have any special conditions we should know about?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Program Hours & Fees:**

**3:00 - 6:30 \$245 per month** \_\_\_\_\_

**3:00 - 7:00 \$270 per month** \_\_\_\_\_



As the parent/guardian of the above named child I do irrevocably assign and grant unto the Boys & Girls Clubs of Northwest New Jersey - Wayne Unit the immutable and unconditional right and permission to use my child's name, likeness, voice, and/or image for the purpose of producing an audio, video, photograph, film, and/or printed material including the right and permission to copyright, use, produce, and/or publish said audio, video, photograph, film and/or printed material at the sole discretion of the Boys & Girls Clubs of Northwest New Jersey - Wayne Unit. I further waive any and all right to inspect and/or approve any audio, video, photograph, film and/or printed material that may be published, distributed and/or otherwise utilized as deemed appropriate by the Boys & Girls Clubs of Northwest New Jersey - Wayne Unit.

**PLEASE CHECK ONE:**

Yes, I do irrevocably give my full consent and authorization as stated above on behalf of said minor  
 No, I do not give my consent on behalf of said minor

I hereby give consent for my child to participate in the Boys & Girls Clubs of Northwest New Jersey - Wayne Unit After School Program. I assume all risk in regard to participation in this and other programs in which my child may participate. I release, indemnify, and agree to hold harmless Boys & Girls Clubs of Northwest New Jersey - Wayne Unit, it's directors, coaches, and volunteers from any liability that may result from participation in activities.

I give permission for my child to be transported by the Boys & Girls Clubs of Northwest New Jersey Staff or by a transportation company hired by the Boys & Girls Clubs of Northwest New Jersey to and/or from the Boys & Girls Clubs of Northwest New Jersey - Wayne Unit and the child's school.

**By my signature, I attest to the following:**

- That the above information is correct.
- That in the event of a medical emergency, I authorize the Boys & Girls Club of Northwest New Jersey to seek emergency medical care for my child as deemed necessary by the Director.
- In the event of an emergency or in order to perform an emergency drill, I authorize the Boys & Girls Clubs of Northwest New Jersey to walk or bus my child to Anthony Wayne Middle School, the designated emergency shelter for the club.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date