Pompton Lakes

Before & After School Program



Boys & Girls Club of Pequannock
2020-2021 Before & After School Program Enrollment Application

A Non Refundable $35 membership fee is due to reserve spot. 5% Administration fee applied to all refunds.

Child's Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone:(____)_____-_____Age: _____Gender: _____

Grade in September 2020:_____School: Lenox Lincoln Lakeside

Circle the option you plan to utilize.

Option 1:	4 Days 12:00PM-5:00PM	$360/ Month
Option 2:	4 Days 12:00PM-6:30PM	$415/ Month
Option 3:	4 Days 12:00PM-5:00PM & 1 Full Day 7AM-5PM	$520/ Month
Option 4:	4 Days 12:00PM-6:30PM & 1 Full Day 7AM-5PM	$575/ Month

Parent/Guardian Information:

Mother's Name: _____

Business Name & Address: _____

Ability to work from home? Yes No Other:_____

Work Phone: (____)_____-_____Cell phone:_(____)_____-_____

Email:_____

Father's Name: _____

Business Name & Address: _____

Ability to work from home? Yes No Other:_____

Work Phone: (____)_____-_____ Cell phone:_(____)_____-_____

Email: _____

Marital Status: Married____ Separated ____ Divorced ____ Widowed ____ Single ____

Please provide documentation from employer if you have no ability to work from home. This will only be considered in the event our program reaches max capacity to accommodate those who need us most.

Other persons authorized to pick up child:

Name: _____ Name: _____

Relationship to child: _____ Relationship to child_____

Phone: _____ Phone: _____

Child's Doctor:_____**Phone:**_(____)_____-_____

Address:_____

Is your child taking any special medication or have any special conditions/allergies we should know about?

_____

_____

Custodial Information:

If a non-custodial parent is not among those persons authorized or unauthorized to pick up your child, please list their name below and attach a copy of the appropriate documents. Please specify if a parent is NOT AUTHORIZED to pick up.

_____

As the parent/guardian of the above named child I do irrevocably assign and grant unto the Boys & Girls Club of Pequannock, New Jersey 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 Club of Pequannock, New Jersey. 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 Club of Pequannock, New Jersey.

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 Club of Pequannock After School Program. I assume all risk in regard to participation in this and any other Boys & Girls Club program in which my child may participate. I release, indemnify and agree to hold harmless the Boys & Girls Clubs of Northwest New Jersey its directors, officers, coaches, and volunteers from any liability that may result from participation in Boys & Girls Club activities.

I give permission for my child to be transported (by the Boys & Girls Club of Pequannock staff or by the transportation company hired by the Boys & Girls Club of Pequannock) to and/or from the Boys & Girls Club of Pequannock 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 Pequannock to seek emergency medical care for my child as deemed necessary by the Director.

X_____ _____

(Signature of Parent or Guardian) Date

Enroll in the Boys & Girls Club of Pequannock Before and After School Program and give your child the opportunity to grow and develop in a fun and educational setting. **Our After Care program is held in Pompton Lakes High School. Lincoln and Lakeside will be transported by bus. Lenox will walk over daily with Staff.** We provide professional staff and a safe environment for our members to play, learn and grow together. Daily activities include homework help, gym time, arts & crafts, sports, board games, special events and more. We also offer Boys & Girls Club of America National Programs including Power Hour (an extension of their educational experience with prize incentives) and SMART Moves (a drug, alcohol and peer pressure resistance program).



Please note: The Before and After School Program follows the public school calendar for both towns with the exception of the final days of school. We will provide Care on all scheduled days with the exception of the final days of school. The program does not run if school is closed or dismissed early due to inclement weather.

Program schedule and fees can change in accommodating state regulations and Covid-19 safety regulations.

For more information please contact:

Danielle Altman

daltman@bgcnwnj.org

or call at (973)-633-9007

Program Hours and Fees:

After School Program

Option 1: 4 Days 1200PM-5:00PM $360/Month

Option 2: 4 Days 12:00PM-6:30PM $415/ Month

Option 3: 4 Days 12:00PM-5:00PM & 1 Full Day 7AM-5PM $520/ Month

Option 4: 4 Days 12:00PM-6:30PM & 1 Full Day 7AM-5PM $575/Month

Minimum of 10 children required to run program. Minimum of 5 children to add group due to Covid 19 restrictions.

All participants must be a member of the Boys & Girls Club of Pequannock. **Membership fees are $35 per year**, payable upon registration and are non refundable. Membership runs from September 1st-August 31st each year. Fees are charged on a calendar month basis.

The following is for office use only.

Start Date:_____ Date form Received:_____ Received by:_____

Payments:

Tuition: Month:_____ Amount:_____ Method:_____

Mem Fee: Date/Method_____ OR Paid for in Sports