

The Spanish Advantage Club

9615 East 59th Street

Indianapolis, IN 46216

317-656-1757

thespanishadvantageclub@yahoo.com

After-School Tutoring Registration Form

2018-2019

Please submit a separate form for each child.

I. STUDENT INFORMATION

Child's Name _____ DOB ___/___/___ Grade _____

Attendance at TSAC

Full-Time _____ (M T W T F)

Part-Time _____ (please circle days your child will attend) (M T W T F)

I will want my child to attend TSAC during Holidays when school is not in session:

YES _____ NO _____

I will need my child to attend TSAC when school is cancelled due to bad weather:

YES _____ NO _____

Extra-Curricular Activities

Please indicate below additional programs your child will be participating in at The Spanish Advantage Club:

____ Running / Jogging Club. (Tues.)

____ Soccer Club. (Wed.)

____ Tennis Club. (Fri.)

Parent Information

Mother's Name _____ Access Code _____

Address _____

Cell phone _____ Home _____ Work _____

Father's Name _____ Access Code _____

Address _____

Cell phone _____ Home _____ Work _____

Family email address _____

II. MEDICAL RELEASE & PERMISSION INFORMATION

Functions and Activities

It is my understanding that participating in the tutoring programs and recreational and other activities of The Spanish Advantage Club are a privilege. I acknowledge that I have spoken with my child about my child's need to comply with the specific rules and requirements established by The Spanish Advantage Club's policies and procedures; rules of conduct set forth by The Spanish Advantage Club; and, state and federal regulations and laws. I understand that The Spanish Advantage Club rules and policies apply to my child and the other students. Prior to my child's participation in such tutoring activities, I acknowledge that there could be certain risks associated with the activities, including by way of example, physical injury due to activity-related accidents. In addition, I acknowledge that there may be other risks inherent in these activities of which I may not be presently aware. I further acknowledge that The Spanish Advantage Club is not a daycare facility nor a school but rather a facility specifically providing tutoring to its participants.

Release of Liability

By signing this Permission/waiver Form, I expressly warrant that the child named above or I (if I am a participant) am capable of withstanding both the physical and mental demands of the tutoring activities. I also expressly assume all risks of the child or me participating in the activities whether such risks are known or unknown to me at this time. I further release The Spanish Advantage Club and its owners, leaders, employees, volunteers, and agents from any claim that my child may have or that I may have against them as a result of injury or illness incurred during the course of participation in the activities.

I further agree to indemnify and hold harmless The Spanish Advantage Club and its owners, leaders, employees, volunteers, and agents from any claims arising from my participation in its activities and program, or as result of injury or illness of my child during such activities. No medications will be administered to minors without written consent from legal guardians.

**** The Spanish Advantage Club is released of all liability concerning those who do not have medical coverage and cannot be responsible for payment of medical expenses incurred during activities. Individuals not having adequate medical coverage assume the risk of injury and all expenses related with the associated injury.**

Medical Information

Doctor _____ Phone # _____

Dentist _____ Phone # _____

Does your child take any medication? YES _____ NO _____

If so, please list _____

Will your child need to be administered medication during the after school tutoring?
YES _____ NO _____

If so, please list _____

Health History

Asthma _____ ADD/ADHD _____ Heart Disease _____ Diabetes _____ Other _____

Allergy Information

_____ Food allergies, Please list: _____

_____ Animals, please list: _____

_____ Bee stings.

_____ Trees, pollen, grass.

_____ Other, please list: _____

III. TRANSPORTATION RELEASE & PERMISSION INFORMATION

I also understand that; I may elect for The Spanish Advantage Club to provide transportation of my child to the tutoring facility from my child's school.

ACKNOWLEDGEMENT OF PERSONAL LIABILITY AND WAIVER

I also understand that this transportation may expose my child to some risks and I assume any such risk that may arise there from. I accept full responsibility for all medical expenses for any injuries that might occur to my child by reason of his/her participation other than by negligence on behalf of The Spanish Advantage Club.

By signing this form, however, I hereby release The Spanish Advantage Club, its owners, administrators, directors, officers, tutors, employees, agents, assigns, and volunteers ("released parties") from and against any and all claims, demands, actions, complaints, suits or other forms of liability that any of them may sustain in the event that any accident, injury, loss of property or any other circumstance or incident occurs during or as a result of my son's/daughter's transportation conducted by The Spanish Advantage Club for any reasons other than negligence on behalf of the Spanish Advantage Club. This release of liability includes accident, injury, loss, or damages to the student, as well as, to other individuals or property which may result from the student's transportation by The Spanish Advantage Club. I hereby release and agree to hold harmless the Spanish Advantage Club, its officials, agents and employees, from any claims arising out of my son's/daughter's transportation. I also agree to indemnify and hold harmless the released parties from the released claims, including any and all related costs, attorney fees, liabilities, settlements, and/or judgments.

IV. ACKNOWLEDGMENT AND SIGNATURE

I confirm that I have carefully read this TUTORING REGISTRATION FORM and agree to its terms knowingly and voluntarily. I also confirm that I am the parent or legal guardian of the child or I am a student 18 years or older.

I have signed this TUTORING REGISTRATION FORM
this _____ day of _____, 20_____.

This form has been read and is understood by me.

Parent Signature

Date

The Spanish Advantage Club

Emergency Numbers and Pick Up Information

2018-2019

Child's Name _____

Mother's Name _____

Father's Name _____

The following people have permission to pick up my child from The Spanish Advantage Club:

Name _____ Phone # _____

Relationship _____ Phone # _____

Name _____ Phone # _____

Relationship _____ Phone # _____

Name _____ Phone # _____

Relationship _____ Phone # _____

Name _____ Phone # _____

Relationship _____ Phone # _____

Parent Signature _____ Date _____

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BUS PERMISSION SLIP for School

2018-2019

My child will be attending The Spanish Advantage Club after school tutoring. I give my permission for The Spanish Advantage Club to pick him/her up from school each day.

Child's Name _____

Grade _____ Teacher _____

Dismissal Time _____

Mother's Name _____ Cell Number _____

Father's Name _____ Cell Number _____

In case of emergency, call:

Name _____ Phone # _____

Relationship _____

Name _____ Phone # _____

Relationship _____

I will call school and The Spanish Advantage Club when my child is NOT at school and does not need The Spanish Advantage Club's services.

Parent Signature _____ Date _____

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2018-2019

Welcome to The Spanish Advantage Club.

Please read our policies so that you will be familiar with them. As much as we love keeping your children, there are some basic guidelines we must ask everyone to follow so that our facility runs smoothly for everyone. With communication left open, we will always address any problems or concerns you may have with our program. Without communication, we cannot address problems or work with you efficiently.

The Spanish Advantage Club Policies

1. The regular hours for this program will be from school pickup time until 6:30 p.m. Monday through Friday. We understand that circumstances arise beyond your control and you may have to be late picking up your child from time to time. You are permitted one free late pick up. Following that, each time you are more than 10 minutes late by our clock, the late pick up cost will be \$10 for each 15 minutes you are late and is due when you pick up your child that evening.
2. If your child will not be attending the program on a given day, we ask that you notify us at 656-1757 before 9:00 a.m. on that day.
3. If your child stays with us during a holiday week for day camp, an additional fee will be charged. We will offer an entire week of day camp for Spring Break, Fall Break, etc. based on the Lawrence Township school calendar. As long as there is enough interest, we will provide day camp for federal holidays such as Memorial Day, Martin Luther King Day, President's Day, or Labor Day.
4. Inclement weather. Day camp will be provided based on interest. An additional fee will be charged for inclement weather days in addition to your weekly program cost. The additional cost will be \$60 per day.
5. A after school snack and drink will be furnished. However, if you prefer you are welcome to send your own snack.

6. Children in our program will be required to maintain appropriate behavior. Use of profanity, physical force toward others, disrespect toward staff and/or peers, stealing and/or disregard for the rules and policies of our program will not be tolerated. If a problem arises with your child and repeated efforts by The Spanish Advantage Club staff to correct the problem are unsuccessful, the parents will be consulted for assistance to help resolve the matter.

Discipline procedures used at The Spanish Advantage Club include time out, withdrawal of play activities, loss of privileges and writing apologies.

7. Upon arrival at the site, the children will receive a snack and then broken into age groups. Daily program activities include homework time, reading, writing, vocabulary, games to encourage speaking, and movie time in Spanish.

8. Please inform us at 317-656-1757 or at thespanishadvantageclub@yahoo.com if your child is sent home from school with any contagious condition, such as staph infection, head lice, ringworm, etc. In order for us to properly perform prevention methods, your help is needed in this area. We will take extra precautions to prevent further spreading of any contagious/spreadable conditions once we are informed.

9. Tuition payments are due on the Friday previous to the week attending, no later than 6:00 p.m. A \$10 late fee will be accrued for each week the account is delinquent. You can make your payment either by check, credit card or using the "zelle pay" method. You will need to register to do this by going to chase.com/zelle.

10. Tuition is \$85 per week for full time (3 to 5 days a week), and \$45 per week for part time (1 or 2 days a week)

11. Day camp/holiday camp. When Lawrence Township schools are out, we will offer day camp. The daily rate is \$40 per child per day.

12. A \$30 charge will be required for all checks returned unpaid for any reason. Returned checks must be made good immediately. If the account becomes delinquent, late fees will be charged.

13. Pick up can only be made by an authorized parent or guardian. Parent or other designated person has to sign out the child every day before he/she leaves the site.

I have read all policies and guidelines concerning The Spanish Advantage Club. I understand there are NO EXCEPTIONS to these policies.

Parent's Signature _____ Date _____