



# Registration Form

For Afterschool Program

One participant per form - Please print and fill out completely  
 This program is for children in K-5<sup>th</sup> grade who are enrolled in  
 Aventura Waterways K-8 Center

<b>Participant:</b> First		Last	Date of Birth	Age	<input type="checkbox"/> Female <input type="checkbox"/> Male
Street Address	Apt#	City, State		Zip	
Home Phone		Work Phone		Cell Phone	
<b>Parent/Guardian:</b> First		Last			
Street Address	Apt #	City		Zip	
Home Phone		Work Phone		Cell Phone	
<b>EMERGENCY CONTACT INFORMATION</b>					
<i>Please list an emergency contact not living in the household. This is in case of an emergency only. We will contact the parent or guardian first.</i>					
First Name		Last Name		Contact Number	
Does this person require assistance or special accommodation to participate in the chosen activity?					<input type="checkbox"/> Yes <input type="checkbox"/> No
Specify special needs:					
Activity #	Program Name	Day/Date	Resident fee	Non-resident fee	
<b>AFTERSCHOOL REGISTRATION</b>					
<i>Please check the appropriate month(s) your child will be attending afterschool. *Registration must be completed by Payment Due date of the selected month(s).</i>					
<b><u>Monthly Service Period</u></b>					
<input type="checkbox"/> August & September (Payment due by 8/17)		<input type="checkbox"/> December (Payment due by 11/25)		<input type="checkbox"/> March (Payment due by 2/24)	
<input type="checkbox"/> October (Payment due by 9/23)		<input type="checkbox"/> January (Payment due by 12/23)		<input type="checkbox"/> April (Payment due by 3/24)	
<input type="checkbox"/> November (Payment due by 10/23)		<input type="checkbox"/> February (Payment due by 1/27)		<input type="checkbox"/> May & June (Payment due by 4/21)	
<b>Total Fees \$</b>		<input type="checkbox"/> Cash (walk in only)		<input type="checkbox"/> Credit Card (online and walk in only)	

**Payment Deadline Disclosure**

I accept the terms and individual responsibilities for submitting payment towards the Aventura Waterways K-8 Afterschool program in a timely matter by scheduled due dates of each month. If payment is not made by due date, your spot will be forfeited. If space is still available, then you can pay after the scheduled due date. If no space is available you will be placed on a waitlist and notified once space does become available.

READ, UNDERSTOOD AND AGREED TO this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Parent or Guardian's Signature: \_\_\_\_\_ Name (print): \_\_\_\_\_

Witnessed By: \_\_\_\_\_

**Waiver For Minors**

As the parent or guardian of a minor child participating in the City of Aventura (the "City") cultural, sporting, entertainment or other activity or event, or as the parent or guardian of a minor child participating as a user of any City facility, premises, or equipment, I hereby waive any claim against the City and its agents, servants and employees, hereafter arising from injuries to said child, which said injury is sustained while upon said facilities or premises, using such equipment, participating in said activities or being transported therefrom or thereto, regardless of whether such injury is caused in whole or in part by the negligence of said City or by the negligence of the agents, servants or employees of City.

Further, I do covenant to indemnify, hold harmless and defend the said City, its agents, servants and employees from any claim, liability or damages hereafter arising out of any injury to said child, regardless of whether such injury to said child is caused in whole or in part by the negligence of said City or by the negligence of the agents, servants and employees of City.

I hereby give permission for the City to call my child's physician and/or to arrange for emergency service technician response or for transportation to a hospital, in the event of any injury or illness to my child; although I understand that the City assumes no responsibility to do so.

READ, UNDERSTOOD AND AGREED TO this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Child's Name: \_\_\_\_\_ Parent or Guardian's Signature: \_\_\_\_\_

Witnessed By: \_\_\_\_\_

**Afterschool Program Magazine**

In our efforts to go green, The City of Aventura Afterschool Program Magazine is available online at [www.cityofaventura.com](http://www.cityofaventura.com). Parents/Guardians will be held responsible for all information in this magazine. If you have any questions, please feel free to contact the Aventura Community Recreation Center directly.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Print/Electronic Media Release**

I hereby give my permission to the City of Aventura to take, use and display photographic or digital images of me or my child, which may be posted on the City's Internet website or forwarded to newspapers and other publications in which the photograph or digital image would be associated with the City of Aventura.

READ, UNDERSTOOND, AND AGREED TO this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Participant/Parent/Guardian Signature: \_\_\_\_\_ Witnessed By: \_\_\_\_\_

**Official Use Only**

- Form is complete, signed and witnessed.
- Confirm birth certificate and age of participant.
- Confirm residency with acceptable form of identification. Confirm that child is enrolled in Aventura Waterways K-8.
- Update household in RecTrac.

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_