

KLUBHOUSE KIDS, INC.

2023-2024 APPLICATION

NON-REFUNDABLE REGISTRATION FEE - \$25 PER FAMILY _____

\$100 SECURITY PER FAMILY _____

CHILDS NAME _____ BIRTHDATE _____ M/F _____
Last First

STREET _____ TOWN _____ ZIP CODE _____

PARENT/GUARDIAN _____ HOME PHONE _____ CELL PHONE _____

EMPLOYER _____ WORK PHONE _____

EMPLOYER ADDRESS _____ EMAIL _____

PARENT/GUARDIAN _____ HOME PHONE _____ CELL PHONE _____

EMPLOYER _____ WORK PHONE _____

EMPLOYER ADDRESS _____ EMAIL _____

PERSONS, OTHER THAN PARENTS, WHO **ARE** ALLOWED TO PICK UP YOUR CHILD:

NAME _____ PHONE _____

NAME _____ PHONE _____

PERSON WHO **MAY NEVER** PICK UP YOUR CHILD:

NAME _____

HEALTH CONDITIONS:

DOCTORS NAME _____ PHONE _____

SCHOOL _____ TEACHER _____ GRADE _____

PLEASE CIRCLE DAYS FOR WHICH CARE IS NEEDED: **MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY**

My child _____ is in good health.

Signature of parent/guardian

Date

I understand that I will be given several days' notice if a special activity is planned. Specific information on special activities will be provided as they are scheduled.

By signing below, I also give my permission for my child to participate in walking field trips.

If parents cannot be reached in an emergency, the Klubhouse Kids staff will call the local rescue squad to take your child to a medical facility for emergency care. Continued efforts will be made to reach you. Your signature below indicates approval for this procedure.

Signature of parent/guardian

Date

I have received a copy of the Parent Handbook and the following information is included in it and or available on site for parents to review.

DCF Information to Parents

NJ State School Age Child Care Regulations Manual available for inspection

Klubhouse Kids Policy on Communicable Diseases.

Klubhouse site has a copy of the Federal Unsafe toy list.

Policy on the expulsion of children from enrollment.

Policy on the release of children

Policy on the Methods of Parental Notification

Policy on the Use of Technology and Social Media

Parent/guardian

date

Application can be mailed to:

15 Fieldstone Road

Califon, New Jersey 07830