# After School Program Registration

An ATA After School Regi	stration Form mu	ist be complete	ed for EACH child.	
Full Name:		Age:	B-Day:	
Street Address:	City:_	Sta	te: Zip:	
Email:	Home	Phone:		
School:		Grade:		
Allergies, medications, othe	er concerns:			
Pediatrician:	Location:	Ph	one:	
Parent/Guardian Name:				
Employer Name:				
$\Box$ Custodial Parent $\Box$	Non-Custodial	□Authorize	d to pick-up student	
Work Phone:	Cell Phone:			
Parent/Guardian Name:				
Employer Name:				
$\Box$ Custodial Parent $\Box$	Non-Custodial	□Authorize	d to pick-up student	
Work Phone:	:Cell Phone:			
	Emergency Infor act/Authorized to pick-up Addres	student (other than p	·	
Home Phone:	Work P	hone:		
Cell Phone:				
	paperwork such as custody parent is not allowed to pic		ched	

# PARENT/GUARDIAN CONSENT AND AGREEMENT - HOLD HARMLESS, LIABILITY WAIVER, AND POLICY STATEMENT

## **CHILD NAME:**

#### **Parent/Guardian Consent and Agreement**

I am requesting that the above child be admitted to the ATA Leadership Martial Arts After School Program. I understand the nature and scope of the program. I will adhere to all policies and procedures of the program. I understand that there are risks and dangers associated with the program and I as the parent/guardian agree to assume all risks. I understand that a copy of the child's immunization form and birth certificate or passport must be submitted with this registration form in order for a child to attend. In the event that I cannot be reached in an emergency involving the above named participant, I hereby give permission to authorize medical personnel to provide medical treatment deemed necessary by such personnel. I also give permission for the named child to be transported to ATA Leadership Martial Arts.

In consideration of the above named participant being permitted to enroll in the ATA Leadership Martial Arts After School Program I hereby release, indemnify, and hold harmless ATA Leadership Martial Arts, its assigned staff, fellow students, and instructors from any and all claims and demands, costs, charges, and expenses for harm, injury, damage, or loss which may be sustained by the participant as a result of or relating to participation in After School.

#### I HAVE READ, AND I UNDERSTAND THE ABOVE LIABILITY RELEASE.

#### **Payment Policies**

COST	4-5 Days per Week	\$250 per month
	2-3 Days per Week	\$205 per month
	1 Day per Week	\$165 per month

To reserve your spot we require a non-refundable deposit of the first month's tuition by August 14th for the Fall Session and December 21st for the Spring Session. Monthly tuition payments must be done through an Electronic Funds Transfer (EFT) or the entire Fall or Spring Session may be paid in full at the beginning of the session. EFT's must be completed during registration.

#### **Program**

The ATA Leadership Martial Arts After School Program includes: a uniform for new students (A new student is someone that has not previously participated in the After School Program or VIP Trial.), Black Belt Training Class, Leadership Class, snack, and homework time. Students are eligible to test for their next rank every 8 weeks. There is a testing fee of \$50 for color belts. There are discounts for registering early and for multiple family members.

**EQUIPMENT** We will be using an ATA Protech Training Tool each 8 week testing cycle that you will need to purchase if your child does not already own the training tool. When your child reaches the rank of Camo belt they will need ATA sparring gear, which is \$250 (includes gear bag, gloves, foot gear, chest protector, face shield, head gear, mouth piece, and mouth piece case).

#### **Policies and Procedures**

**PICK-UP TIME** Children need to be picked up from ATA Leadership Martial Arts by 6pm. There is a late fee of a \$1 per minute thereafter.

**ABSENTEE NOTICE** If you pick up your child early from school or your child is absent from school, ATA Leadership Martial Arts must be notified by 1pm that your child will not need pick-up. Failure to notify ATA Leadership Martial Arts that your child will not need pick-up by 1pm on the day of pick up will result in a \$25 fee that will be charged automatically via the method of payment they have on file on the 4th offense they reserve the right to dismiss your child from the ATA Leadership Martial Arts After School Program. Please understand, ATA Leadership Martial Arts is not trying to collect more fees, they are just trying to keep each child safe and keep the after school program running on time.

**ILLNESS** ATA Leadership Martial Arts reserves the right to release a child if he or she appears to be too ill to participate in the program or is thought to be contagious. ATA Leadership Martial Arts will notify the child's parent/guardian or their emergency contact that they need to be picked up within a half hour. If the child has not been picked up within a half hour, ATA Leadership Martial Arts reserves the right to take any action necessary to ensure the health and safety of the child.

**COMMUNICATING AN EMERGENCY** ATA Leadership Martial Arts will first attempt to contact the child's parent or guardian. If the parent or guardian cannot be reached, ATA Leadership Martial Arts will contact the Emergency Contact. ATA Leadership Martial Arts will take necessary actions in the child's best interests until the parent/guardian or emergency contact has been reached.

**MEDICINE** ATA Leadership Martial Arts must receive a note of written authorization to give medicine from a parent/guardian for any medicine that is to be administered during program hours. All medications should be labeled with your child's name, name of the medication, dosage amount, and the time(s) to be given. Medication must be in the original container with the prescription and direction label attached.

**REPORTING CHILD ABUSE AND NEGLECT** ATA Leadership Martial Arts is responsible for reporting any and all signs of child abuse or neglect.

**UNACCEPTABLE BEHAVIOR** ATA Leadership Martial Arts expects participants to cooperate with ATA Leadership Martial Arts staff and instructors, respect others, and follow directions. Unacceptable behaviors include not complying with staff/instructors, profanity, disrespecting others, failure to follow directions, violent physical contact, possession of drugs, or possession of a weapon. ATA Leadership Martial Arts reserves the right to release a child from the After School Program for unacceptable behavior.

**MEDICAL RECORDS** A copy of the Virginia School Health Entrance form and birth certificate or passport must accompany the child's application. Your child will not be able to attend the After School program until his/her file is complete.

**UNIFORM & EQUIPMENT CARE** Each participant must have their ATA uniform to wear everyday for the Black Belt Training class and Leadership Training class portions of the After School program. On Tuesdays and Thursdays participants are allowed to wear the ATA Creative/X-treme uniform if they want to. Parents or Guardians are required to make sure each participant's uniform goes home to be washed weekly. ATA Leadership Martial Arts recommends that participants leave their equipment at ATA Leadership Martial Arts for the duration of the After School session (Fall or Spring) that the participant is signed up for, since the child will be unable to carry their equipment with them to their elementary school. At the end of the session participants should take their equipment home. **ATA Leadership Martial Arts asks that your child not bring games or toys from home.** 

**DAYS OF OPERATION** ATA Leadership Martial Arts After School will run during school days presented by the Albemarle County School System. The program will not run when county schools are closed or there are emergencies constituting early dismissal. Payment will not be prorated during these circumstances.

**TRANSPORTATION** Transportation is provided from select schools in the ATA Leadership Martial Arts van by a qualified driver. ATA Leadership Martial Arts reserves the right to change the select schools for fall/spring sessions. Parents/guardians are required to write a letter to the school notifying them of the arrangement for your child.

I hereby grant ATA Leadership Martial Arts permission for (child name) \_\_\_\_\_\_ to:

1) be transported from school

2) participate in all programs facilitated during ATA Leadership Martial Arts After School Program including the use of all equipment.

### PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

Date: