

Boys & Girls Club of Clifton 2017 - 2018

Before Care Application

Drop off Time is 7:05 am

Cost: \$60.00 per month due by the 10th of each month. Breakfast is served and included as part of the in school program for students who qualify for the free breakfast **ONLY**. Students who qualify for the reduced breakfast may pay out-of-pocket as the service is used. If a student does not qualify for free or reduced breakfast, he/she may purchase the supplied cold breakfast, or bring breakfast from home.

Please Print

Child's Name: _____ Phone: _____

Address: _____

School: 2 5 8 9 11 13 17 Grade: _____ Age: _____ Gender: M or F

Emergency Contact Name: _____ Phone #: _____

Emergency Contact Name: _____ Phone #: _____

Emergency Medical Release - Permission to participate in Before Care Program activities

I, _____ do hereby give my child _____ permission to attend and/or participate in the Before Care Program activities sponsored by the Boys & Girls Club of Clifton, its employees, associates, and contributors. In further consideration of the benefits to be gained by our child we covenant that we will never institute any action at law against the Boys & Girls Club of Clifton, Inc., its agents, servants and employees, on account of any injury or other loss or damage sustained by my child's participation, furthermore, I hereby do authorize medical examination and treatment of my son/daughter by a qualified licensed physician in any event of an accident and all efforts to contact the parents/guardian have been exhausted.

Parent/Guardian Signature: _____

Date: _____