

Please list **names, phone numbers and the relationship to the child** of persons authorized to pick up your child(ren) from this program (including you). You will notify us that someone else is coming to pick up your child(ren) before pick up time. **Photo ID must be presented at pick up.**

Name	(Please print)	Phone	Relationship ?
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1. Mr/Mrs/Ms: _____
2. Mr/Mrs/Ms: _____
3. Mr/Mrs/Ms: _____
4. Mr/Mrs/Ms: _____

Do you have a church home? Yes___ No___ If not , would you like to be contacted? ___
Would you like to be on our church's newsletter mailing list? ___
Services are Sundays at 9:30am & 11am. All are Welcome!

Acceptance & Removal Policies

Please read carefully & sign

1. I understand the Ginter Park UMC After School Program (GPUMC ASP) operates per the Code of Virginia, Section 63.2-1716, which allows child day centers operated by religious institutions the opportunity to file for an exemption from licensure by meeting documentation and other requirements specified within the religious exemption law.
2. Upon acceptance of this application, I hereby assume responsibility for payment by the 10th day of each month. Late payments will be charged a late fee of \$25. There will be a \$25 charge for any returned checks. If paying by credit/debit card, payments may be made weekly.
3. I understand this application must be accompanied by the non-refundable registration fee of \$25 per child, \$50 max.
4. This application and our medical form for each child are both due **before** the child's first day of class.
5. I understand that The GPUMC ASP reserves the right to permanently dismiss any child from the program who is deemed extraordinarily disruptive or unruly, or a danger to him/herself or others.
6. If you choose to withdraw your child, you must give a 2 week written notice. No refunds will be given.
7. I have received and read the After-School Policy Manual.

I have read, understand, and accept all of the information stated in this agreement.

Signature of Parent/Guardian

Date

Please print your name