

2018-2019 West Holmes After School Middle School Program Clubs

West Holmes again is offering an after school program for students in grades 6-8. Students who take advantage of this program will have the opportunity to participate in club activities. The startup date for the program will be Monday September 17, 2018 and will run through May 9, 2019. Specific club meeting schedules will be sent home after registration is complete. There is a \$20 fee for **each** club your child would want to join.

No school transportation home is provided. If for some reason there is no school (holiday, snow day, etc.) then there will be no after school program that day.

We will try and accommodate as many students as we can in this program, but need to follow state guidelines of 1:18 ratio, staff: students.

Please fill out the attached registration form and send it into the middle school office.

Please call Mr. Woods or Mr. Fioritto at 330-674-4761 with questions.



GET INVOLVED, JOIN A CLUB

2018-2019 West Holmes After School Middle School Program Registration

Child's Name _____ Age ____ Grade ____

Home Address _____

Parent / Guardian's Name(s) _____

Home Phone _____ Mother's Cell Phone _____

Father's Cell Phone _____

My child has permission to have snacks in the afternoon.

Check what your child will be participating in (they are allowed to participate in multiple clubs):

Archery Club Art Club Chess Club

Power of the Pen Science Club Tennis Club

Persons authorized to pick up my child and to be considered emergency contacts if you can't be reached are : (list more than 3 if necessary). Please list phone numbers also.

- 1)
- 2)
- 3)

Medical problems, food allergies, and non-food allergies we should be aware of:

I understand that it is my responsibility to transport my child from school in the evening (5:38).

I give permission for my child to be photographed while participating in the program for the purpose of publicity (news articles, newsletters, media productions). I give permission for my child to use the internet for educational purposes. **I understand that information on emergency medical forms currently on file in each building's office will be used if any medical treatment needs to be provided.**

Parent / Guardian Signature _____ Date _____

Please complete a separate registration form for each child.