REGISTRATION FORM

Homework Club on SME

TO INQUIRE: SEND REGISTRATION FORM TO SME@HOMEWORKCLUBKIDS.COM

AFTER-SCHOOL ENRICHMENT PROGRAM

SPRING 2024

Homework Club Office Use Only:

Class Attending:

Student:	
Grade: Teacher:	
Parent/Guardian #1:	
Work Ph#: Cell Ph#:	
Email:	
Parent/Parent/Guardian #2:	
Work Ph#: Cell Ph	
Email:	
MONDAY: CHESS NUTS: ADVANCED (12:45PM-1:45PM)	TO THE LEFT, MARK THE CLASSES YOUR STUDENT
TUESDAY: BREAK THROUGH SPORTS (2:30PM-3:30PM) WEDNESDAY: CODE NINJAS: GAME DESIGN	IS INTERESTED IN:
(2:30PM-3:30PM) THURSDAY: CHESS NUTS: BEGINNER (2:30PM-3:30PM)	WEEK 1: MARCH 4TH-8TH WEEK 2: MARCH 11TH-15TH WEFK 3: MARCH 18TH-22ND
Enrichment classes will run for 1 hour after school, starting the week of March 4th and continuing for a total of 8 weeks. Enrollment is open to all SME students. STUDENT ALLERGIES:	WEEK 6: APRIL 15TH-19TH WEEK 7: APRIL 22ND-26TH WEEK 8: APRIL 29TH-MAY 3RD MAKE UP FOR MONDAY, APRIL 8TH: MONDAY, MAY 6TH
PHYSICIANS NAME:	Ph#:
Please check box to acknowledge that you have read the followed Release: In the event of an emergency, Homework Club will endeavor to before any medical action is taken. However, if contact cannot be form is completed by all participants. By signing this form, I here by Homework Club to hospitalize and administer necessary treatments surgery, to my child.	reach the parents/guardians of the child involved e made, it is imperative that this medical release by authorize the physician or hospital designated
Late Pick-Up Policy Acknowledgment: I acknowledge that as the parent/guardian of a the child enrolled Program, it is my responsibility to ensure that my child is picked understand that for every minute I am late in picking up my child the Late Pick-Up Policy and understand the importance of punctual program and the well-being of all students involved.	up immediately after their one-hour class. I d, a fee of \$1 will be incurred. I agree to abide by
PARENT/GUARDIAN NAME (Printed):	DATE:
PARENT/GUARDIAN SIGNATURE:	
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Fees Paid: