



2017-2018 After School Program

STUDENT & PROGRAM INFORMATION:

Name _____ Birthdate (mm/dd/yyyy) _____ Age _____

School Grade as of September 2017 _____ Gender: Female Male MCP # _____

Does the student require a booster seat for transportation in a vehicle? Yes No

***Please note that as per government legislation, children who are four to eight years old, or weigh between 40 and 80 pounds (18 and 37 kilograms), or are 4'9" (145 cm) tall or less are required to use a booster seat.*

List the names of any siblings of the Student that are attending the MAX After School Program, MAX Preschool, St. Michael's Church Daycare, or Gingerbread House:

1. _____ 2. _____

If attending the MAX location at 1 Olympic Drive, Mount Pearl, please select the school that the student will be attending in the 2017-2018 school year:

- Paradise Elementary St. Peter's Primary Newtown Elementary Morris Academy Elizabeth Park Elementary
 Mary Queen of the World St. Matthew's Elementary Holy Family Elementary Goulds Elementary Octagon Pond Elementary
 Mount Pearl Intermediate Topsail Elementary (Note: Offered at 2 locations)
 Other – please enter the school name and note that transportation will not be provided by MAX _____

If attending the MAX location at 34 New Cove Road, St. John's, please select the school that the student will be attending in the 2017-2018 school year:

- Mary Queen of Peace Roncalli Elementary MacDonald Drive Elementary Bishop Field Elementary Larkhall Academy
 Vanier Elementary Rennie's River Elementary Holy Trinity Elementary St. Francis of Assisi
 Other – please enter the school name and note that transportation will not be provided by MAX _____

If attending the location at St. Thomas of Villa Nova Parish Hall, CBS, please select the school that the student will be attending in the 2017-2018 school year:

- Topsail Elementary (Note: Offered at 2 locations) St. Edward's Elementary
 Other – please enter the school name and note that transportation will not be provided by MAX _____

If attending the location at The Parish of St. Lawrence Church, PC/SP, please select the school that the student will be attending in the 2017-2018 school year:

- Beachy Cove Elementary
 Other – please enter the school name and note that transportation will not be provided by MAX _____

Does the student have any medical (including food and other allergies), physical, or behavioural concerns that our staff should be aware of? (CONFIDENTIAL)



PARENT/GUARDIAN INFORMATION:

1. Name _____ Relationship to Student _____
Home # _____ Work # _____ Cell # _____
Email _____ Address _____
City/Town _____ Province _____ Postal Code _____

2. Name _____ Relationship to Student _____
Home # _____ Work # _____ Cell # _____
Email _____ Address _____
City/Town _____ Province _____ Postal Code _____

EMERGENCY CONTACT (other than parents/guardians listed above):

- Please note that each person must be 18 years of age or older.

Name _____ Relationship to Student _____
Home # _____ Work # _____ Cell # _____

PERSONS OTHER THAN PARENTS/GUARDIANS LISTED ABOVE WHO ARE PERMITTED TO PICK THE STUDENT UP FROM MAX:

- Please note that each person must be 18 years of age or older and may be required to show picture identification before the student is released to him or her. Any persons not listed here will not be permitted access to the student.

1. Name _____ Relationship to Student _____
2. Name _____ Relationship to Student _____
3. Name _____ Relationship to Student _____

PAYER INFORMATION:

- If there is one (1) payer, please complete the attached form titled Pre-Authorized Debit (PAD) Agreement for 2017-2018 After School Program (Single Payer).
- If there are two (2) payers, they will alternate bi-weekly payments so that each payer will make a payment every four (4) weeks.
 - Payer 1 must complete the attached form titled Pre-Authorized Debit (PAD) Agreement for 2017-2018 After School Program (Payer 1).
 - Payer 2 must complete the attached form titled Pre-Authorized Debit (PAD) Agreement for 2017-2018 After School Program (Payer 2).

Email completed form to info@yourmax.ca or deliver in person to any MAX location. For inquiries, email info@yourmax.ca, call 733-7330 or visit www.yourmax.ca.



Terms & Conditions for 2017-2018 After School Program (please read carefully)

1. A completed registration form must be submitted in person or by email to any MAX Arts. Athletics. Wellness. (hereafter referred to as MAX) location. Because spaces are limited, submission of a registration form does not mean that a student will be granted a space in the requested program. Returning MAX After School students and their siblings, returning students of other MAX childcare programs and their siblings, and existing MAX customers may be given priority for registration, followed by a "first-come, first-served" policy for all other registrants.
2. Once registered, to officially withdraw, a parent/guardian must complete and submit a Discontinuation Form in person or by email. Discontinuation Forms are available at our facilities. Verbal notification and/or non-attendance will NOT constitute discontinuation. Up to July 31, 2017, discontinuations are subject to a \$150+HST cancellation fee per student. From August 1-31, 2017 clients will pay the first bi-weekly payment, and a \$150+HST cancellation fee per student. From September 1, 2017 - March 31, 2018 discontinuing clients must give a minimum notice of 28 days, and pay a \$50+HST cancellation fee per student. From April 1 – June 28, 2018 discontinuing clients must give a minimum notice of 28 days, and pay a \$150+HST cancellation fee per student. Please note that recurring pre-authorized debit payments are non-refundable once processed. If a balance is owing after the discontinuation has been processed, the next scheduled recurring payment will be adjusted to collect this balance in full.
3. Children attending the MAX after school program must be toilet trained and able to tend to their own toiletry needs before enrollment into the program. If the child does not meet this requirement upon starting the program, access to the program can be restricted or withdrawn and be subject to regular cancellation terms.
4. I have read, understand and are in agreement with all conditions and expectations set out and presented in the "Parent Handbook" supplied to me upon registration in the program.
5. If a payer's pre-authorized debit (PAD) payment fails and the payer's account becomes delinquent, MAX may remove the student from the program after providing a minimum of 7 days written notice to the parent(s)/guardian(s) and the student's school.
6. A \$25.00 + HST = \$28.25 service fee will be charged on all declined pre-authorized bank debits returned as Non-Sufficient Funds (NSF).
7. All charges for Declined Pre-Authorized Debits, Late Notices and Late Pick-Ups will be added to a pre-authorized debit (PAD) amount for a scheduled payment following the date of the charge. If any charges are incurred in June 2018 after the last scheduled payment has been processed, an additional pre-authorized debit payment will be processed on June 30, 2018 to cover these charges. Costs associated as per 2017-2018 After School Handbook.
8. Regular attendance and punctuality is expected for all days in which the student is registered. There will be no refund for days missed by a student.
9. MAX reserves the right to withdraw any program or level of instruction, to change an instructor of any program, or to close any MAX location at any time without notice or liability other than to refund fees received for sessions cancelled due to such withdrawal or closing.
10. Unless MAX is otherwise advised in writing by a parent/guardian, the parent(s)/guardian(s) permit the student to participate in all MAX After School Program activities including supervised offsite trips. All students in attendance must participate in all scheduled activities and arrive at MAX with the proper attire required to participate in the activities scheduled for the day. Activity schedules are posted on www.yourmax.ca.
11. MAX is not responsible for any student's personal possessions that may become lost, stolen, or broken while attending a MAX program.
12. Safety is a top priority at MAX. Upon departure, the student must be signed out of the program by a parent/guardian or one of the people listed on the registration form as persons other than parents/guardians who are permitted to pick the student up from MAX. If the MAX staff does not know the person picking the student up from MAX, the person will be asked to show photo identification before the student is released to him or her. A student is not permitted to leave the MAX facility by himself or herself unless a parent/guardian provides written permission to MAX.
13. Students are not allowed to carry or administer their own medication while attending MAX. If the student requires a dosage of his/her prescribed medication during the program, a parents/guardian must have a physician complete a release form. Medication must be given directly to the Program Coordinator by a parent/guardian. All medication must be in the original packaging and clearly labeled with the student's name, medication name, date, dosage, doctor's name, and telephone number. Due to possible allergic reactions, students must be taking the medication for at least 24 hours before attending the program. Please note that MAX staff may not administer medication to any student unless trained by medical personnel at the expense of the parents/guardians.
14. All of the student's relevant illnesses, medical conditions, disabilities, and/or behavioral concerns have been disclosed to MAX on the registration form.
15. You hereby give MAX and its employees the authority to act on your behalf in case of any emergency. If, due to such circumstances as injury or sudden illness, medical treatment is necessary, you authorize MAX to take whatever emergency measures are deemed necessary by MAX for the protection of the student while in the care of MAX. You understand that this may involve calling a physician, interpreting and carrying out his or her instructions, and transporting the student to a hospital, including the possible use of an ambulance. This could also include emergency transportation required as a result of fire or other environmental emergencies. You understand that this may be done prior to contacting you, and that any expense incurred for such treatment, including ambulance fees, is your responsibility.
16. MAX promotes an atmosphere of safety and mutual respect and will not tolerate inappropriate conduct or behavior. Violation of these principles may result in immediate termination of the student's enrollment.
17. In consideration of being allowed to participate in MAX activities and programs and to use MAX facilities, equipment and services, you hereby forever waive, release and discharge MAX and its officers, agents, employees, representatives, executors and all others acting on their behalf from any and all claims or liabilities for injuries or damages to the student's person and/or property, including those caused by the negligent act or omission of any of sparing those mentioned or others acting on their behalf, arising out of or connected with the participation in any activities, programs or services of MAX or the use of any equipment at various sites, including home, provided by and/or recommended by a MAX representative.
18. MAX takes customer privacy seriously. We will not sell, distribute, barter or transfer any personally identifiable information obtained about our students to parties outside of MAX, without the authorized written consent of a parent/guardian except where required by law such as in emergency situations or by legal order. In the normal course of business and for the purpose of advertising, MAX may photograph or video students as they partake in MAX activities. Such photographs or video may be used by MAX for publicity purposes without the student's name attached unless a parent/guardian otherwise advises MAX in writing. No photograph or video is permitted to be taken inside any MAX location without the express written consent of MAX.

ACCEPTANCE: *By signing below, I acknowledge and agree to the terms and conditions written above and I represent that the information given by me on the Registration Form is complete and accurate.*

Student's Name _____

Date _____

Parent/Guardian Name _____

Parent/Guardian Signature _____