

Adventure Club

After School Child Care for School Age Children (K – 5)

Contact Information: **Marilyn Randle, Director**

816-776-3075 & 816-776-5401

This program provides care and supervision for children after school. Children are given a safe environment and a chance to participate in enrichment opportunities.

Care and Enrichment Opportunities:

- Help with homework
- After school snack
- Appropriate social skills taught
- Outside play with good weather
- Reading center
- Crafts
- Organized group games

Adventure Club runs from after school to 6:00 pm. The district will provide transportation for the children from their respective schools to the Dear Elementary building. A nutritious snack will be provided for all children.

Days Opened and Closed

Days that school is in session, Adventure Club is open.

Early Release Days: Childcare is provided on days that school is dismissed early for parent conferences and inclement weather.

Holiday Breaks and School Not in Session: On days there is no school, Adventure Club is closed.

Fees

Enrollment fee: \$25.00 for first child and \$20.00 per sibling

Full-time: \$45.00/week – sibling discounts available

Part-time: \$9.00/day – no sibling discounts for part-time

Early Release Days: \$3/hour

FEES MUST BE PAID IN ADVANCE AT ALL TIMES

RICHMOND R-XVI SCHOOL DISTRICT
Adventure Club Application

\$25.00 Enrollment fee: paid by – Check # _____ Cash _____ Date _____

Type of childcare needed: Full time _____ Part time _____ Grade Level: _____

Child's Name: _____ Sex _____ Birth Date _____

Address: _____ City: _____

Parent Information:

Mother's Name: _____ Cell Phone: _____

Address: _____ Home Phone: _____

Employer: _____ Work Phone: _____

Father's Name: _____ Cell Phone: _____

Address: _____ Home Phone: _____

Employer: _____ Work Phone: _____

Please list below the people that may pick up your child if you are not available. Please list them in the order you would want them contacted.

Name	Relationship	Cell Phone	Home Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

REGISTRATION AGREEMENT

1. I understand that I will pay \$ _____ per _____ for my child's care.
2. I will sign my child out on the attendance sheet.
3. If my child becomes ill, I will be telephoned and I will make immediate arrangements for someone to pick up my child.
4. I will notify personnel of the Adventure Club if someone other than those listed is to pick up my child.
5. The staff and the Adventure Club are not responsible for lost or stolen property.
6. I understand that if I have any concerns with the conditions of the Adventure Club, I may visit with the staff and or the director at any time.
7. I have read and agree to the policies and fee structure outlined in the Parent Handbook.

Child's Name

Parent's Signature

Attach the enrollment fee with the enrollment packet to finalize registration (\$25.00/child)

Medical Form

Child's Name: _____ Date of Birth: _____

Does your child take any medications? _____ If yes, please list below:

Medication

Reason for Taking

Does your child have any allergies? Be sure to list food allergies, too.

At the present time or in the past two years, has your child been diagnosed with or had difficulty with the following?

Yes	No	Condition/Problem	Explain Treatment and Current Needs
____	____	Asthma	_____
____	____	Allergies	_____
____	____	Blood disorder	_____
____	____	Diabetes	_____
____	____	Ear/Hearing	_____
____	____	Mouth/Nose/Throat	_____
____	____	Breathing	_____
____	____	Heart	_____
____	____	Stomach	_____
____	____	Urinary	_____
____	____	Bone/Muscle	_____
____	____	Emotional	_____
____	____	Head injury	_____
____	____	Seizures	_____
____	____	Other	_____

There are times when, with your permission, we can administer medicine. Please initial next to the medicine that we have permission to administer.

____ Tylenol

____ Ibuprofen

____ Cough drops

____ Tums

Parent Signature: _____

Date: _____