AFTER SCHOOL KIDS (ASK) REGISTRATION (MS/HS) 2021-2022 Confidential Student Information

Student Name	Grade	
	City	
	City	
Home Phone	Cell Phone	
student out	fied in case of illness/accident and a Phone # Phone #	
2	Pnone #	
Allergies, issues, comments:		· · · · · · · · · · · · · · · · · · ·
	SION STATEMENT (Condensed Version will thrive emotionally, academically	
PARE	NT/GUARDIAN RESPONSIBILITIES	
cannot be reached, the staff will call th	staff will first contact the parent or guard ne emergency contacts. If the emergency ill call for an ambulance. The parent/guard ce.	is such that immediate medical
River High School building at 6:00 PM.	ve a set arrival time. The ASK bus (South Drop off time depends on the number of case a parent/guardian is not at their stop	fother students on the bus.
I understand and agree to abide by the	e above parent responsibilities.	
Signature	Dat	e

^{**} ASK MS/HS does not charge a program fee but requires at least 50% attendance for participants.

* ASK requires at least **ONE** parent or guardian to attend at least two (2) family engagement/involvement events (which includes one parental class) per school year as required by the 21st CCLC to continue funding.