

TODAY'S DATE _____ START DATE _____

815 N McLean, Memphis, TN 38112 901-300-4860 or 901-258-9473
lesliem@venschool.com

Registration Fee: Date _____ Check or receipt # _____ \$ _____

Please print clearly

Child's Name _____ male _____ female _____

Address _____ zip _____

City, State _____

Home phone _____ D/O/B _____ Age _____

School _____ Grade _____

Class room at Snowden, Little Flower or Vollintine School:

Teacher _____ Rm # _____

Mother/Guardian _____ Wk Phone _____

Place of employment _____

Cell phone _____

Email Address _____

Father/Guardian _____ Wk Phone _____

Place of employment _____

Cell phone _____

Email Address _____

Child lives with: both parents _____ mom _____ dad _____ other _____

*****If your child does not live with both parents, and you do not wish for the child's other parent to pick him or her up from aftercare, then we must have a copy of the court order on file.** Otherwise we are required by law to let the child go with the other parent.

"Parenting Plan" If your child(ren) does not live with both parents in the same house then we will need a "Parenting Plan" on file. Received: Yes _____

Medical History: Is the child in general good health? Y / N **If NO, please submit a statement indicating any health conditions staff should be aware of.**

Does your child have **asthma**? Y / N If yes does he/she carry an inhaler? Y/N

Is your child on any medication? Y / N

Please list medications _____

Any history of **Allergies** (including food & medical allergies) _____

Does your child carry an **EPI Pen**? If yes, where is it kept? _____

Pediatrician's Name _____ Office Phone _____
 Hospital of Choice _____
 Insurance Company _____ Policy/Group # _____
 Emergency friend _____ home _____ work _____
 Emergency friend _____ home _____ work _____

I, _____ the undersigned parent or guardian, do hereby release and discharge Vollintine Evergreen Neighborhood Afterschool/Living Hope church, its authorized representatives, and staff from all liabilities of any kind and character upon any claim, demand or cause of actions which I, my heirs or my assigns (on behalf of said applicant) may have against church, representative, or staff. This includes the time riding in the Vollintine Evergreen Neighborhood Afterschool bus and staff personal cars (when needed) from Snowden, Bruce and Vollintine Schools to Living Hope Church as well as field trips. Furthermore, in the event of an accident or illness, I hereby grant permission to said staff or representative to administer necessary first aid and/or take applicant to the nearest medical facility for additional treatment.

Signed _____ Date _____

1. My child's health records are current and on file at _____
 School.
 Initial _____ Date _____

2. I would like for my child to **ride the VENS Afterschool Bus from School to Living Hope Church each day.**

Yes _____ No _____ Initial _____

3. My child may leave from their class at "Snowden" and **walk to the Snowden Elementary library** where they will meet staff and then walk to the bus (applicable to K-3rd grade only)

Yes _____ No _____ N/A _____ Initial _____

4. **Parents/guardians are responsible to call before 2:45 p.m. the day of, if your child/children will not be attending Afterschool or will arrive late. 901-258-9473**

5. I, _____, am legal guardian of above mentioned child, and I give permission for VENS Afterschool Staff to take pictures of my child involved only in Afterschool activities, and for the pictures to be used on the Evergreen & Living Hope Church websites and/or other Evergreen & VENS publicity.

6. My child may watch: (please check one)

G rated movies _____

PG rated movies _____

7. I have received a copy of the Vollintine Evergreen Neighborhood Afterschool Brochure (policies and procedures)

Yes _____

CHILD PICK-UP FORM

A. The following people **HAVE** permission to pick-up the child named below from Vollintine Evergreen Neighborhood Afterschool Program. It is the parent's responsibility to notify the director in writing of any changes.

*Note: Any person unfamiliar to the VENS staff will be required to **show proof of identification**. Under **NO** circumstances will the child be released to anyone other than those listed above without **WRITTEN** permission from the parent.

Child's Name	DOB	Age	Sex
_____	_____	_____	F / M
_____	—	—	

1. Name: _____ Relation: _____
Address: _____ Phone: _____
2. Name: _____ Relation: _____
Address: _____ Phone: _____
3. Name: _____ Relation: _____
Address: _____ Phone: _____
4. Name: _____ Relation: _____
Address: _____ Phone: _____
5. Name: _____ Relation: _____
Address: _____ Phone: _____
6. Name: _____ Relation: _____
Address: _____ Phone: _____
7. Name: _____ Relation: _____
Address: _____ Phone: _____
8. Name: _____ Relation: _____
Address: _____ Phone: _____

B. The following person **MAY NOT** pick-up my child(ren) from Vollintine Evergreen Neighborhood School Afterschool. *****If your child does not live with both parents, and you do not wish for the child's other parent to pick him or her up from aftercare, then we must have a copy of the court order on file.** Otherwise we are required by law to let the child go with the other parent.

1. Name: _____ Relation: _____

Address: _____ Phone _____

This form is legally binding, so by signing it, you agree that all of the information provided herein is correct. False Information will result in termination of contract.

Father/Guardian's
Signature _____

Date _____

Mother/Guardian's
Signature _____

Date _____

Provider name: Vollintine Evergreen Neighborhood Afterschool; 815 N. McLean Blvd. Memphis Tn.

VENS BUS RIDING AGREEMENT

RIDING THE BUS Safety is our primary concern. We have highly qualified drivers and a school bus that is built like a tank. Each of our drivers has a commercial license with a P endorsement (passenger), a childcare certification; two state mandated training sessions per year and current first aid and CPR.

After School Bus Rules:

1. Provide the bus driver with their first and last name as they enter and exit the bus (Roll Sheet)
2. Leave windows alone. Our bus does not have air conditioning so in hot weather the bus driver will let the windows down for air.
3. Keep the noise level down by using indoor voices
4. Stay seated until the driver announces for them to get up
5. Keep the bus clean, throw away all trash
6. No food or drink allowed on the bus
7. Keep aisle cleared of backpacks, books, musical instruments, etc.
8. Enter and exit in an orderly manner—no pushing or shoving
9. Remove all of their belongings as they exit the bus

Buses departure from the Schools:

The bus will be parked on McLean Blvd. **Pre K-3rd** will be walked to the bus by the afterschool staff from the elementary library. The **4th -8th** graders are responsible to walk to the bus by themselves. If you know your child will be absent, please call the Afterschool number as soon as possible **(901) 258-9473**. The bus driver is required to stay at the school **10 minutes** after dismissal time. The first 2 weeks we will have him stay longer due to new students, schedules, and teachers. After this time period, children that do not make it to the bus in time should go back to the office to inform the secretary that they missed the bus. VENS Afterschool will send the first available bus or car back to the school for a fee of \$5.00 or you may pick them up at the school.

*** If your child does NOT make it to the bus on time for some reason, then he/she must go to the office and call Vens at 901-258-9473. The bus leaves promptly at 3:25. If your child would be overly upset because he/she missed the bus, then you may want to consider having him/her meet the at the elementary library at 3:15 and walk with the staff each day.**

Procedure for picking your child up at the school (Snowden, Little Flower or Vollintine):

You may pick up your child at their school. If you have not called the Afterschool Program please inform the driver that your child will not be riding the bus. If your child gets on the bus you are required to sign the bus roll to check your child out. However, if the bus has left the school grounds it will not be allowed to stop to allow your child off until it reaches Living Hope.

I have read and understand the above information about riding the VENS bus. By signing below I agree to explain the bus rules to my child and agree to the bus riding policies.

Child(ren)'s Name: (Please Print) _____

Parent's Signature: _____