

Team Prime Time After School Program at City Language Immersion Charter

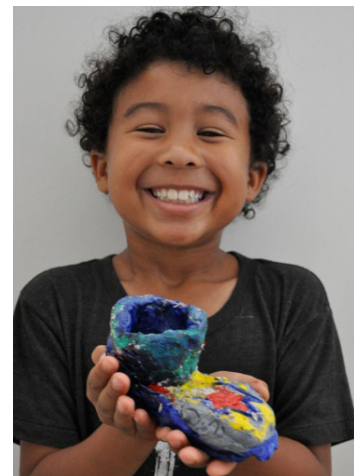


EVERY DAY AFTER SCHOOL

Monday - Friday from dismissal until 5:30 pm

\$250 per month
Grades TK - 5th
Starts September 5
Pre-enrollment Deadline:
August 31

(Minimum Attendance Required.
Subject to change.)



PROGRAM HIGHLIGHTS

- Daily Homework Support
- Sports Camp
- Art Academy
- S.T.E.A.M. Team
- Around the World
- 10:1 Staffing Ratio
- Seasonal Showcases



EMAIL APPLICATION TO INFO@TEAMPRIMETIME.ORG OR FAX (310) 838-8825

For more information

Call: Team Prime Time at (310) 838-7872



City Language Immersion Charter 17-18



Child's Name: _____ Date Received: _____

Fall 2017 Grade: _____ Gender M/F: _____ Date of Birth: _____ / _____ / _____

PARENT OR GUARDIAN INFORMATION

Parent Name(s): _____

Address: _____ Apt. #: _____

City: _____ State: _____ Zip: _____ Home Phone: (_____) _____

Cell Phone 1: (_____) _____ (mom/dad) Cell Phone 2: (_____) _____

Email 1: _____ (mom/dad) Email 2: _____

PAYMENT INFORMATION

Preferred method of Payment: Credit Card _____ Check _____

CREDIT CARD INFORMATION (ALL ACCEPTED) _____ CVV: _____ EXP. DATE: _____

Please provide credit card even if you selected "pay by check" The card will only be charged to avoid applicable late fees.

Does your child(ren) have any physical activity restrictions? _____ YES _____ NO

Does your child(ren) have any allergies to any foods or medications? _____ YES _____ NO

Does your child(ren) have any dietary restrictions? _____ YES _____ NO

If YES to any of the above, please download the Medical Information and Clearance and submit with application.

Will your child(ren) be required to take any medication while at TPT? _____ YES _____ NO

If YES, please download either the Prescription or Non-Prescription Medication Dispensing Agreement and submit with application.

Persons in addition to myself authorized to pick up my child(ren)

Name: _____ Phone: _____

Name: _____ Phone: _____

1. In case of an emergency and I cannot be reached, I authorize the Team Prime Time Director, or his designee, to obtain whatever medical treatment he or she deems necessary for the welfare of my child. I understand the potential risks involved in the activities provided by Team Prime Time and I hereby agree to assume all such risks, including the risk of injury to my child. I hereby release, and agree to protect, defend, indemnify and hold harmless Team Prime Time and its owners, officers, directors and staff from any and all claims arising out of injury to my child. I also agree to accept full responsibility, financial or otherwise, for the conduct of my child. I further understand that my child may be dismissed from the program for conduct deemed improper by the Director in his sole discretion.
2. I authorize the exchange of information regarding my child between Team Prime Time and City Language Immersion Charter.
3. I understand and agree that Team Prime Time is not responsible for my child or for the actions and behavior of my child in the event that my child leaves the supervision of the program during the hours of the program with me or a person authorized to pick up my child as set forth above, regardless of whether or not he or she has been signed into or out of the program.
4. All pictures, films, tapes, or other likenesses of my child taken during camp hours are the property of Team Prime Time and may be used for any and all promotional materials.
5. I understand, authorize, and agree that any art projects made by my child during, or as part of, the Team Prime Time (or any likenesses, replicas, or re-creations of any such art projects made by my child) may be used, depicted, or displayed by Team Prime Time for any promotional or fundraising purposes that Team Prime Time may choose or deem appropriate.

I have read the above conditions and agree to comply:

Signature of Parent or Guardian

Date

**PLEASE FAX SIGNED APPLICATIONS TO THE TEAM PRIME TIME OFFICE at (310) 838-8825 or
SCAN AND EMAIL TO INFO@TEAMPRIMETIME.ORG
QUESTIONS CALL (310) 838-7872**