

**2025-2026 REEDSBURG CLC AFTER SCHOOL PROGRAM REGISTRATION FORM**  
**PINEVIEW ELEMENTARY SCHOOL**

Please fill out a separate form for each child! Complete BOTH pages!

Student's Name		Grade		School	
Date of Birth		Age		Teacher	

Guardian 1 Name and Relationship	
Street Address	
Email Address	
Primary Phone #	
Secondary Phone #	
Guardian 2 Name and Relationship	
Street Address	
Email Address	
Primary Phone #	
Secondary Phone #	

**Emergency (local) contact(s):**

Name		Phone		Relationship to Student	
Name		Phone		Relationship to Student	

**The following people (in addition to those above) are authorized to pick my child up:**

Name		Phone	
Name		Phone	
Name		Phone	

**\*\*** Without a phone call or note, no one, with the exception of those listed above will be allowed to take your child. (Notify CLC of any court ordered custody issues or persons who should never be allowed to pick up your child.) Please be aware that in the event that your child is not picked up by 5:45 we will attempt to contact the above persons.

My child will be attending CLC on the following days (please check all that apply). Children may attend 3, 4 or 5 days. Students are expected to attend on a regular basis.

	Monday		Tuesday		Wednesday		Thursday		Friday
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My child will be walking home following CLC unless we are notified otherwise		Yes		No
My child will be walking home even after daylight savings (Fall)		Yes		No
I need help transporting my child(ren) home after CLC		Yes		No

I give permission for my child to be photographed for media purposes		Yes		No
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Does your child have any physical limitations or allergies?		Yes		No
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Is there any other information about your child that you feel would be beneficial for the CLC staff to know in order to work better with your child?

I have completed the other side of this form. Space is limited. I understand there is a possibility that my child could be placed on a waiting list. Funding for this program was provided by The Nita M. Lowey 21st Century Community Learning Center grant and the Reedsburg School District.

Signature

Date

## CLC After School Parent Sign Off

(Please initial each statement and sign at the bottom)

1. \_\_\_\_\_ **Discipline:** I understand that the regular school rules apply to the CLC After School Program and the CLC Program has a disciplinary/participation policy that my child is required to follow. I understand that the CLC Program reserves the right to withdraw my child for discipline/participation issues that cannot be resolved with reasonable accommodations.
2. \_\_\_\_\_ **Field Trip Permission:** I give permission for my child to attend field trips offered by the CLC After School Program. I realize that I will be supplied with exact dates and destinations prior to the trip. I understand that some trips may require an additional cost. I understand that outdoor trips occur throughout the winter months and my child needs to be dressed appropriately. Without prior arrangements, my child may not be at CLC if NOT attending scheduled trips.
3. \_\_\_\_\_ **Homework Time:** During this designated time, if my child has homework, his/her main responsibility is to be working on homework and then read his/her books. I understand that my child may not finish all of his/her homework during the designated time. Students will not be required to give up their enrichment activities to do homework during non-homework designated times. Homework time is not meant to be a replacement for parent participation in homework. On field trip days, homework time will NOT be offered.
4. \_\_\_\_\_ **Enrichment & Outdoors:** I understand that children need a break from a long day of school work. I understand that physical enrichment activities and outdoor play will be a regular part of the CLC Program throughout the year.
5. \_\_\_\_\_ **CLC Student Surveys:** The Reedsburg CLC staff have my permission to administer surveys to my child. These surveys will help us evaluate the after school program so that we can improve the services we provide.
6. \_\_\_\_\_ **Waiting List:** I understand that in order for the CLC Program to ensure the highest quality, my child may be placed on a waiting list.
7. \_\_\_\_\_ **Mandatory meeting:** I understand that a guardian for my child(ren) must attend a meeting to assure I understand everything about the program. There is a meeting in August before the program begins. If joining in the middle of the year, you must speak with the CLC Coordinator to receive needed information. After that, it is your responsibility to contact the CLC Coordinator, Allyson Cummings, to set up a time to meet.
8. \_\_\_\_\_ **Staff Communication:** I understand and approve of communication between the CLC staff and the Reedsburg School District (RSD) staff in order to best help my children.
9. \_\_\_\_\_ **Tutoring:** I understand and approve of my child(ren) receiving small groups or one to one tutoring during CLC. This may or may not occur throughout the year depending upon the child's needs and availability of a tutor. My child might miss homework or enrichment time for tutoring.
10. \_\_\_\_\_ **Attendance:** I understand that daily attendance and special events with guardians are required for the grant. Low numbers could mean the loss of funding. I understand that the CLC Program reserves the right to withdraw my child for low attendance and to allow others to join. I will try to attend at least two family/guardian events in the year.

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### OFFICE USE ONLY

Date Guardian Meeting was Attended \_\_\_\_\_