

Ludlow Community Center
Randall Boys and Girls Club
Child Information Form
School-Age Childcare Program

Child's Name: _____ D.O.B. ___/___/___

Home Address: _____

City: _____ State: _____ Zip: _____

Date of Admission (start date): ___/___/___ Grade as of Sept/08: _____

Home Telephone: () _____

Name of School Child is Attending: _____

Primary Language (if other than English): _____

Is there documentation of physical exam, immunization, and lead screening on file at Child's School? Yes _____ No _____ (if no, then we must have a copy)

List below any special limitations or concerns your child may have including dietary restrictions, allergies, Special Needs, or chronic health conditions (if none, please indicate in writing "NONE"):

Please obtain a medication consent form from The CLUB if your child needs to take medication while at The Club.

Physical description of child and/or current picture: (required by Department of Early Education and Care)

Eye Color: _____ Hair Color: _____ Sex: M F

Height: _____ Weight: _____ Skin Color: _____

Identifying Marks: _____

Child's Physician: _____ Phone: _____

Address: _____

Health Insurance Coverage: _____

Policy Number: _____

Parent/Guardian Information:

Parent/Guardian Name: _____

Social Security Number: ____ - ____ - ____

Email address: _____

Relationship to Child: _____

Home Address: _____

Home Phone #: () _____

Business Name: _____

Business Address: _____

Business Phone #: () _____ Hours at Work: _____ to _____

Cell Phone #: () _____

Parent/Guardian Name: _____

Social Security Number: ____ - ____ - ____

Email address: _____

Relationship to Child: _____

Home Address: _____

Home Phone #: () _____

Business Name: _____

Business Address: _____

Business Phone #: () _____ Hours at Work: _____ to _____

Cell Phone #: () _____

Parent/Guardian Signature

____/____/____
Date

****Please note that all information is kept confidential.****

Ludlow Community Center
Randall Boys & Girls Club
Child Pick-Up/Emergency Contact Information Form

The list of contacts you provide The Randall Boys & Girls Club below will be used in the case of an emergency and the parent/guardian cannot be reached. The list will also act as a release form. Please supply a written note to the Human Service Director or Assistant Human Service Director if anyone other than the parent or emergency contacts will be picking up. **Children will not be released to anyone except the parents/guardians and those who are listed below unless written confirmation is given to the Human Service Director or Assistant Human Service Director.** An ID will be required at the time of pick-up.

Name: _____
Relationship to Child: _____
Address: _____
Home Phone: () _____
Work Phone: () _____
Cell Phone : () _____

Name: _____
Relationship to Child: _____
Address: _____
Home Phone: () _____
Work Phone: () _____
Cell Phone : () _____

Name: _____
Relationship to Child: _____
Address: _____
Home Phone: () _____
Work Phone: () _____
Cell Phone : () _____

I give permission to the above listed contacts to pick up my child from The Randall Boys & Girls Club.

Parent/Guardian Signature

____/____/____
Date

**Ludlow Community Center
Randall Boys & Girls Club
Consent Form**

Please circle one:

I understand that the Staff at The Randall Boys & Girls Club are trained in the basics of First-Aid and CPR and I authorize them to give my child First-Aid and CPR when appropriate.

yes or no

In the case of emergency, I give The Randall Boys & Girls Club permission to take my child to the nearest medical emergency treatment facility and to authorize necessary treatment until I can be reached.

yes or no

I give The Randall Boys & Girls Club permission to take my child on neighborhood outings with proper supervision and weather permitting.

yes or no

I give The Randall Boys & Girls Club permission to take my child to the adjacent playground and fields with proper supervision and weather permitting.

yes or no

I give The Randall Boys & Girls Club permission to photograph my child to be used in displays and promotional materials.

yes or no

I give my child permission to access the internet while at The Randall Boys and Girls Club with the understanding that proper supervision and safeguards are in place.

yes or no

Parent/Guardian's Signature

____/____/____
Date

**Ludlow Community Center
Randall Boys & Girls Club
Transportation Plan**

Child's Name _____

Please check the program(s) that apply to your child*

Before-School _____

My child will arrive at the program by:

- Unsupervised walk
- Supervised walk (who _____)
- School bus drop-off
- Parent/guardian drop-off
- other (describe _____)

My child will depart from the program by:

- Parent/guardian pick-up
- Unsupervised walk*
- Supervised walk*(who _____)
- School Bus
- Other (describe _____)

*Please note that any child who will be walking to school must have written consent on file from the parent/guardian. Only children who attend Baird Middle School will be able to walk to school.

After-School _____

My child will arrive at the program by:

- Unsupervised walk
- Supervised walk (who _____)
- School bus drop-off
- Parent/guardian drop-off
- other (describe _____)

My child will depart from the program by:

- Parent/guardian pick-up
- Unsupervised walk*
- Supervised walk*(who _____)
- School Bus
- Other (describe _____)

*Please note that any child who will be walking home must have written consent from the parent/guardian.

Children will only be released to those listed on the child pick-up/emergency consent form.

Parent/guardian signature

date

***Ludlow Community Center
Randall Boys & Girls Club
School-Age Childcare Application***

Your Application is complete if you...

___ have filled out the registration form.

___ have filled out and signed the back of the emergency card.

___ Have signed the financial form (you will receive this when registering).

___ Paid the registration fee

___ Read the parent handbook

___ Made Transportation arrangements with The Ludlow Public Schools.

I, _____, parent of,

(parent/guardian)

_____, have read The

child's name

Randall Boys & Girls Club parent handbook and Understand the policies and procedures of The School- Age Childcare Programs.

parent/guardian signature

date

OPTIONAL FORM



The Randall Boys and Girls Club is committed to working closely with The Ludlow Public School. At times it is beneficial to a child for the administration of The School-Age childcare program to exchange information with The Ludlow Public Schools. If you wish to allow this exchange of information please sign the below release form. All release of information will be used in the best interest of the child and will be kept confidential.

Authorization to release information

I hereby give permission to The Randall Boys and Girls Club School-Age Childcare Program to release and exchange any information, both written and verbal, with the Ludlow Public School, pertaining to the records of _____ (child's name).

Signature of Parent/Guardian

Date

**Ludlow Community Center
Randall Boys and Girls Club
School-Age Childcare Program**

Important Reminders

1. Kindergarten Open house -
Thurs., September 4th 6:00-6:30 PM

On Thursday, September 4th we will be conducting an open house for all Kindergarteners. This will give the children the opportunity to view the facility and meet some of the staff so they will feel more comfortable when the program starts. We encourage all new Kindergarten students to attend. All children must be accompanied by a parent or guardian.

2. Parents **must** call and notify The Club if their child is not attending on a given day.
3. Transportation arrangements must be made through the Ludlow Public Schools before children start the program.
4. Before School parents must walk their children into the building and sign them in at the front desk.