



AFTER SCHOOL CARE HEALTH FORM

SCHEDULE:

Lower School: 3:05 - 3:45pm in the Library

Students will work on homework and read during this time, and may bring a snack. Children will go to Extended Day Room in the ELC at 3:45pm until pick-up before 6:00 p.m.

Middle School: 3:15 - 5:15pm in the Library

Students will work on homework, read, or work quietly during this time. This not time for socializing or for just waiting until an athletic event begins or ends. If not picked up by 5:15pm, students will go to the Extended Day Room in the ELC until pick-up before 6:00pm. It is imperative that, for safety reasons, all students **sign in** upon arrival to the library, and **sign out** when they leave.

Please return completed Emergency Information Form to School Nurse prior to attendance.

Student Name: _____ Grade: _____
 Home Number: _____
 Mother's #'s Work: _____ Cell: _____ Other: _____
 Father's #'s Work: _____ Cell: _____ Other: _____
 Other # in case you cannot be reached:
 Name: _____ Numbers: _____
 Relationship: _____

List any medical conditions or allergies your child may have:

Condition/Allergy	Treatment

Please list any medication to be kept for the student during After School Care. Otherwise, it will be kept in the office of the school nurse and not always readily available.

Condition/Allergy	Symptoms	Medications	Dosage/Treatment

My student may occasionally be picked up by:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Occasionally your child may need to receive Acetaminophen, Ibuprofen, or Benadryl; we will follow the treatment permission you indicate on the "Permission to Treat" form kept on file in the nurse's office.

Parent Signature: _____ Date: _____