



The Anchor Club Enrichment Program

At West Vine St. School, 17 W. Vine St. Pawcatuck

For Stonington Public Schools

860-572-0506 ext. 2304

REGISTRATION FORM

2024 - 2025 School Year

CHILD'S INFORMATION

Child's Full Name					Nickname	
Address					Home Phone	
School	Teacher	Grade	Age	Date of Birth	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name			Home Phone		
Address			Cell Phone		
Employer			Work Phone		
Employer Address (must include street, town, zip code)			Primary Email Address – this is our primary method of communication.		

Parent/Guardian Name			Home Phone		
Address			Cell Phone		
Employer			Work Phone		
Employer Address			Email		

EMERGENCY CONTACT/AUTHORIZED PICK-UPS - *At least one person 18 years or older must be listed.*

Name	Relationship	Home Phone
Address		Cell Phone

Name	Relationship	Home Phone
Address		Cell Phone

Name	Relationship	Home Phone
Address		Cell Phone



Student Name _____

ENROLLMENT AND SCHEDULE

I would like my child's enrollment with the Anchor Club to begin on: _____

<input type="checkbox"/> Morning Program	My child will attend these days: <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri	Approximate drop-off time for planning purposes: _____ AM Drop Off
<input type="checkbox"/> Afternoon Program	My child will attend these days.: <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri	Approximate pick-up time for planning purposes: _____ PM Pick up

PARENT STATEMENT OF UNDERSTANDING

Please initial each section to indicate that you understand and agree to the policy. Leave blank any section that you would like clarification on, and your questions will be answered at the registration meeting.

	Upon confirmation of enrollment, I agree to pay the \$40 per student Registration Fee within 3 Business Days. I am aware that Registration Fees are non-refundable should I choose to cancel enrollment.
	I understand that tuition can be paid weekly or monthly. I will select a payment plan upon enrollment and will adhere to that plan unless I request, in writing, to change switch.
	I understand that weekly tuition is due on Monday each week or that monthly tuition is due on the first of each month.
	I understand that there will be a \$25 Late Fee for tuition payments received after 6 PM Wednesday for Weekly payers or by the 10th of the month for Monthly payers.
	I understand that my account needs to be kept current. Failure to keep my account current may result in the loss of my spot.
	I understand that there will be no deductions in the cost of my tuition for absences or school closings.
	I understand that 2 weeks' notice, in writing, is required to remove my child from the program.
	I agree to notify the Anchor Club of any absences or changes in my student's schedule.
	I understand that my child will not be dismissed to anyone that is not on the authorized list without prior written consent and that there will be no exceptions to this policy.
	I agree to sign my child in and out of the program daily.
	I agree to pick my child up before 6:00 p.m. each day. I understand that not doing so will result in late pick-up fees and/or suspension from the program. Late Pick Up Fees accrue at \$5 for every 5-minute increment beginning at 6:00PM.
	I authorize The Anchor Club to photograph my child engaged in activities. I understand his/her picture may appear in brochures or other school publications or on the school website.
	I agree to read and sign off on all policies included in the Parent Packet, issued to me prior to enrollment. I understand that it is my responsibility to request a meeting with the Director regarding any policies I question or need further information on. I agree that submitting the Signature pages of these policies implies my understanding of, and agreement to, all policies stated there-in. These policies include: Participation, Behavior Management, and the policies and practices as stated in the Parent Handbook.
	I give my child permission to participate fully in the program, including field trips and hikes on the school grounds.

Printed Name _____

Signature _____

Date _____



Student Name

STUDENT HEALTH INFORMATION

Confidential and to be kept in a secure location for emergency access only.

Pediatrician Name	Phone
Dentist Name	Phone
Health Insurance Company	Group #
Name of Insured	ID #

CURRENT MEDICATIONS

Medication 1	Diagnosis	Prescribed By
Medication 2	Diagnosis	Prescribed By
Medication 3	Diagnosis	Prescribed By

ALLERGIES OR SPECIAL ACCOMMODATIONS

Does your child have any allergies or special needs? Yes No

If yes, please explain and/or attach additional information:

HOSPITALIZATIONS

Has your child been hospitalized within the last year? Yes No

If yes, please explain why:

STATEMENT OF AUTHORIZATION

In the event of a medical urgency, I authorize The Anchor Club staff to take any action it deems necessary and appropriate, including administering first aid, CPR, and/or calling emergency personnel to care for and/or transport my child to a medical facility.

Parent/Guardian Signature

Date



**The Anchor Club Enrichment Program
2024-2025 Fee Schedule**

Enrollment	Daily	Weekly	Monthly	Notes
Registration Fee	N/A	N/A	N/A	\$40 Due at Registration
AM Program	\$10	\$50		
PM Program	\$11	\$55		
Early Dismissal PM	\$10/day	N/A	N/A	Due only from families who sign up for care on early release days.
Drop-In Non-Member (AM or PM) *Space permitting	\$15	N/A	N/A	\$25 registration fee due with first drop-in service.

*Fees are per student and are based on 181 school days.

Tuition Policies

- Rates are projected based on a daily rate of \$10 (AM)/\$11 (PM) multiplied by 181 school days to determine the annual fee necessary to cover program expenses. For this reason, there are no reductions in tuition for absences, holidays, or school closings.
- Tuition payments may be made on a weekly, monthly, or annual basis. Parents/guardians must indicate their preference and adhere to it for the full school year for our billing system to be set up accordingly.
- Payment must be made via money order, check, or through the payment portal. Cash payments cannot be accepted.
- Requests of schedules of less than 5 days will be granted only as space permits. Preference will be given to full-week requests to ensure full attendance daily, as this is essential for the financial stability of the program.
- Annual fees are due at the time of registration to secure your child's spot in the program
- Parents/Guardians are required to sign a Tuition Agreement prior to enrollment in the program