



# AFTERSCHOOL ENRICHMENT REGISTRATION

## Fall 2025 PROGRAMS

SCHOOL: ☐ AVERY ☐ OAKDALE ☐ GREENLODGE ☐ RIVERDALE

STUDENT NAME : \_\_\_\_\_

HOME PHONE # : \_\_\_\_\_ TEACHER : \_\_\_\_\_

HOME EMAIL : \_\_\_\_\_ STUDENT GRADE : \_\_\_\_\_

MEDICAL CONDITION / ALLERGY ON RECORD WITH NURSE? : ☐ YES ☐ NO

EMERGENCY CONTACT: \_\_\_\_\_ PHONE # \_\_\_\_\_

MY CHILD WILL BE PICKED UP FROM ENRICHMENT BY: \_\_\_\_\_

IF THE PROGRAM IS CANCELLED DUE TO WEATHER AFTER SCHOOL STARTS FOR THE DAY AND PARENTS  
CANNOT BE REACHED BY PHONE/EMAIL - PLEASE DISMISS MY CHILD TO : \_\_\_\_\_

*(Bus, Walk, Neighbor/Friend, Aftercare, etc.)*

*Afterschool enrichment programs are designed to enhance a student's school experience. All school rules and conduct expectations are extended to these programs. Students who are disruptive or disrespectful will be asked to stop participating.*

Registration for all afterschool enrichment programs is conducted on a First Come, First Served basis until class limits are reached. Please note, classes with low enrollment may be cancelled and another choice or refund will be offered. **Fall Registration Deadline: October 17, 2025**

### FALL 2025 ENRICHMENT SIGN UP:

Fall 2025 Program Offerings Can Be Viewed Online at:  
<https://www.dedham.k12.ma.us/activities-programs/afterschool-enrichment>



Class Name	Class Cost
	\$75
	\$75
	\$75
	\$75
TOTAL	

Payment is due at the time of registration. Please attach your check to this form and return to your school's Main Office. If you have multiple students registering for programs, please complete a registration form for each student.

**Please Make Checks Payable to: Town of Dedham**

#### Please Read & Sign:

*I am fully aware of the risks inherent and hereby give my consent for the above named applicant to participate in the Afterschool Enrichment programs offered by Dedham Public Schools and hereby release DPS, any of its elected or appointed officials or instructors/employees/volunteers from any and all liability from injuries, claims, demands, costs, loss of services, expenses and/or damages sustained by me or us or our minor children on account of their participation in said program or event.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature Of Parent/Guardian

\_\_\_\_\_  
Printed Name