Westhills Power Hour Plus Enrollment Form

Student Information

Student's Name	Date of Birth	
Home Phone	Other Phone	e
Grade 2016-2017		
	ered Monday-Friday from 3:00-5:30. Fr	idays are optional.
My child will attend	Monday-Thursday orMonday-F	⁼ riday.
	Contact Information	
Primary Contact		
		one
Employer	Work Phone	<u> </u>
Secondary Contact		
	Primary Pho	one
Employer	Work Phone	
List any siblings and the	ir grade level that are applying for Pow	er Hour.
Please list the names an	nd phone numbers of any authorized ad	Lults who may pick
up your child other than	n the listed parent/guardian. <i>If a perso</i>	n IS NOT LISTED, he
	wed to pick up your child. A photo ID m	
Name	Phone Number	Relationship

List any person to whom child <i>MAY NOT</i> be released: (Parent must provide legal documentation to support this request)			
Emergency Release:			
I hereby give the Power Hour Plus Staff authorization to act on my behalf in the case of an emergency involving my child. I understand that in the event of an emergency, I will be contacted immediately. Physician's Name Phone number			
Signature of Parent or Guardian Date			
Parents/Guardian, Please INITIAL the following:			
 My child may be photographed or videotaped for the school website: yesno. My child may be interviewed by the news media and be posted (name and/or photo) in the local newspaper: yesno. I have received and read the summary of child care approval requirements: yesno. (you will receive at parent orientation) I have received and read the Power Hour Plus Handbook. (you will receive at parent orientation) yesno. 			
Parent Signature Date			
Bus transportation is not available this year. Student dismissal begins at 5:30. In order for all children to benefit from the after school program, early pickup will not be allowed.			
Signature of parent or Guardian			