



Memorial Drive United Methodist Church
MiddleAfterschoolProgram
Registration Information

Fall 2017 - Spring 2018
School Year

Registration packets are now available in the Family Life Center Office. Parents **MUST** return the completed registration packet before their youth will be enrolled in MAP at MDUMC.

Please read the attached flyer for more information about the Middle After-school Program (MAP). If you have any questions please contact Lynell Kennedy at lynellkennedy@gmail.com or 713-468-8356, ext. 154.

Fees & Tuition

MAP at MDUMC Fee Structure

5 days/week (3:30 to 6:00 p.m.)	\$185.00/month	Registration Fee: \$75.00
3 days/week (3:30 to 6:00 p.m.)	\$135.00/month	Registration Fee: \$75.00

Families with two or more youth in the program will receive a \$50.00 discount for the second youth.

We will pick up at Spring Forest and Memorial Middle Schools and Westchester Academy.

Starting date: **August 21, 2017**

Memorial Drive United Methodist Church
MiddleAfterschoolProgram

Check List

- Enrollment Agreement (new attendee)
- Emergency Information, which includes insurance information; must be **NOTARIZED**.
(new attendee and returning attendee – we can notarize in our office)
- Copy of Insurance Card, front and back. (new attendee and returning attendee)
- Confidential Information and Transportation Permission Form (new attendee)
- Check, made out to *Memorial Drive United Methodist Church (MDUMC)* for the amount of the registration and August's tuition. Since August is only ten days, your initial payment will be:

5 day program member: $\$83 + \$75 = \$158.00$

3 day program member: $\$43 + \$75 = \$138.00$

**Your youth will not be registered into the program until
the above forms are complete
and a check for the full amount of fees is attached.**

Memorial Drive United Methodist Church
Middle**A**fterschool**P**rogram

Enrollment Procedure

1. Please read this information very carefully and in its entirety.
2. Complete all the forms in the packet and return to the Youth Recreation Office. All forms must be completed to be registered in MAP.

The **Emergency Form** must be completed and **notarized**. A notary will be available when you register, if the form has not been notarized before that day. The **Enrollment Agreement** must be initialed and signed by **parent or legal guardian**.

- * If your youth is returning to MAP, you will need to fill out the Emergency Information Card for 2017-2018 only if information has changed.
3. Fees and tuition due at the time of registration include a registration fee of \$75.00, which is **not refundable**. To be registered into the program, the non-refundable registration fee must be paid. Tuition per month is \$185.00 for 5 days a week or \$135.00 for 3 days a week. Families with 2 or more youth will receive a \$50.00 discount per month.
 4. After registration, if you should find that your youth will not be able to attend MAP, we would appreciate immediate notification. Our office is open throughout the summer. The telephone number is 713-468-8356, ext. 154.

Memorial Drive United Methodist Church
MiddleAfterschoolProgram

Enrollment Agreement

Signature of parent or legal guardian is required on this document.

I understand that this document is a legal contract and that:

1. Registration fees are non-refundable, except when a family is moving out of the Houston area and that family notifies the director of MAP on or before August 1, 2017. _____ Initial

2. I am registering my youth _____ for the circled days each week: M T W T F
If these days change, I will let the MAP Director know.

3. MAP is a monthly commitment, paid monthly, with no refunds for holidays or days absent. Tuition is due on the first of every month, i.e., September 2017 tuition is due on September 1, 2017. _____ Initial

4. Hold Harmless Agreement: Knowing that Memorial Drive United Methodist Church has an Accident Policy for its students, I do assume all the risks and hazards incidental to the conduct of the activities and transportation to and from the activities. I do further hereby release, absolve, indemnify and hold harmless, Memorial Drive United Methodist Church, Middle After-school Program, the organizers, sponsors, and supervisors and/or all of them. In case of injury of my youth, I hereby waive all claims against Memorial Drive United Methodist Church, any segment of Middle After-school Program, the organizers, sponsors, or any of the supervisors appointed by them. _____ Initial

I have read this agreement in its entirety and will abide by the above agreement. I affirm that the information on the enrollment form and the medical information form is correct, to the best of my knowledge.

Signature of Mother or Legal Guardian

Date

Signature of Father or Legal Guardian

Date

Signature of Director, Middle After-school Program

Date

Student Name _____
School _____
Grade _____
Dismissal Time _____

MEMORIAL DRIVE UNITED METHODIST CHURCH
MiddleAfterschoolProgram

Confidential Information & Transportation Permission Form

Youth's Name _____ Name called _____ Gender _____
Address _____ City _____ Zip _____
Date of Birth _____ Youth Cell Phone _____
Mother's Name _____ Cell Phone _____
Work Phone _____ E-mail _____

**Please note (*) who to contact if there is a problem during the day
and the number at which they can most easily be reached.**

Mother's Name _____ Cell Phone _____
Work Phone _____ E-mail _____
Father's Name _____ Cell Phone _____
Work Phone _____ E-mail _____

If parents are separated or divorced, name of custodial parent _____

School Activities in which your youth is involved _____

My youth, _____ has my permission to ride the MAP bus/van
from school to Memorial Drive United Methodist Church each afternoon after school.

I also give permission for my youth to ride the bus/van to various off-campus MAP activities. I will be notified in advance of these activities.

My youth has my permission to ride with the following person(s) to and from Memorial Drive United Methodist Church. I understand my youth is the sole responsibility of the driver of the private car in which my youth is riding.

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Parent or Legal Guardian Signature _____ Date _____

Memorial Drive United Methodist Church

MiddleAfterschoolProgram

EMERGENCY INFORMATION 2017-2018

Youth Name _____ Age _____ Grade _____ Birthday _____

Address _____ City _____ Zip _____

Mother's Name _____ Father's Name _____

Mother's Cell Phone _____ Father's Cell Phone _____

Mother's Work Phone _____ Father's Work Phone _____

Mother's E-mail _____ Father's E-mail _____

Special needs _____

Allergies _____

Medications prescribed for long term/continuous use and why _____

My youth is registered at _____ School, and all medical records are maintained at the school.

All immunizations required by the State Department of Health are up to date, as reflected in those medical records.

If parents cannot be located for illness or emergency, contact these individuals: (persons listed must live in this area.)

1. Name _____ Address _____ Phone _____

2. Name _____ Address _____ Phone _____

Physician _____ Address _____ Phone _____

Medical Insurance Carrier _____ Group Number _____

Name of Insured _____ Insurance Company Phone _____

Do you have _____ HMO? _____ PPO? Do you have co-pay? \$ _____

******Please attach a photocopy of the front and back of your insurance card******

____ Yes _____ No Permission is given for my youth to be transported to and from school or on field trips. I understand that I will be notified in advance of each field trip.

AUTHORIZATION OF CONSENT TO TREAT A MINOR: I hereby authorize Memorial Drive UMC to take my youth to any licensed physician or hospital in a medical emergency if parents and emergency contacts cannot be reached.

Signature of Parent or Legal Guardian _____ Date

Notary Public _____ Date

Must be completed, signed and NOTARIZED. We can notarize at our office.

Memorial Drive United Methodist Church

MiddleAfterschoolP rogram

M.A.P. CALENDAR 2017-2018 School Year

M.A.P. WILL NOT BE IN SESSION ON THE FOLLOWING DATES:

Labor Day Holiday	September 4, 2017
Columbus Day Holiday	October 9, 2017
Thanksgiving Holiday	November 20 – 24, 2017
Christmas Holiday	December 15, 2017 – January 2, 2018
MLK Holiday	January 15, 2018
Presidents Day Holiday	February 19, 2018
Spring Break	March 12 – 16, 2018
Good Friday Holiday	March 30, 2018
Holiday	April 20, 2018
Memorial Day Holiday	May 29, 2018

At this time there are NO early dismissal days.