

**KAMA'AINA KIDS  
A+ REGISTRATION FORM**

Please TYPE or PRINT — Ball point pens only — PRESS HARD

**ST. MICHAEL SCHOOL**

SCHOOL YEAR: \_\_\_\_\_ - \_\_\_\_\_ After Care \_\_\_\_\_ Before Care \_\_\_\_\_

CHILD'S LAST NAME,	FIRST NAME	SEX	BIRTH DATE	GRADE (Entering)	CLASS RM #
CHILD'S LAST NAME,	FIRST NAME	SEX	BIRTH DATE	GRADE (Entering)	CLASS RM #
CHILD'S LAST NAME,	FIRST NAME	SEX	BIRTH DATE	GRADE (Entering)	CLASS RM #

**PARENTS OR LEGAL GUARDIANS AUTHORIZED TO PICK UP CHILD:**

FATHER/LEGAL GUARDIAN	HDL#	WORKPLACE/SCHOOL	WORKPLACE #	CELL#
MOTHER/LEGAL GUARDIAN	HDL#	WORKPLACE/SCHOOL	WORKPLACE #	CELL#
STREET ADDRESS		CITY	ZIP	HOME PH #
DOCTOR'S NAME		ADDRESS		PHONE #
MEDICAL INSURANCE			POLICY #	

Medical Conditions/Allergies/Medications/Special Needs That We Should Be Aware Of

*I authorize only the following people to pick up my child or to be called in case of an emergency (in addition to parents/guardians):*

NAME	ADDRESS	HDL#	WK#	HM/CELL#
NAME	ADDRESS	HDL#	WK#	HM/CELL#

**PARENT/GUARDIAN CONSENT FORM**

I hereby agree that, if Kama'aina Kids staff is unable to contact me or one of the persons listed as emergency contact, I hereby consent that if my child exhibits signs of illness or injury, that at the discretion of the Kama'aina Kids supervisor on duty, my child may be taken to the nearest medical facility and be given any examination/treatment that is deemed necessary by the personnel of the medical facility, and if permissible by medical facility, subsequently released to Kama'aina Kids Supervisor or staff-in-charge.

I hereby give my child permission to attend and participate in the activities conducted by Kama'aina Kids' A+, Before Care, and Holiday Care programs for the school year noted above.

I hereby authorize Kama'aina Kids to use my child's name and video or photograph at any time and in any manner in connection with its advertising, publicity, and public relations programs. The video-photo may only be used by Kama'aina Kids. No further claims will be made by me.

**DISCIPLINE POLICY**

Discipline is used to assure the safety and well-being of all program participants. All children are expected to respect themselves, other people and their property. If a child is not following the guidelines of Kama'aina Kids staff consistent with these expectations, then child will take a "time out" from the activity at the staff member's discretion. A child with continued behavior problems will be sent to Kama'aina Kids' Program Site Coordinator who may contact the parents for the purpose of removing the child from the program. Kama'aina Kids reserves the right to refuse any child future participation in its programs.

I hereby authorize Kama'aina Kids to exercise these discipline policies in regard to my child.

**CONFIDENTIALITY**

I understand that any information in this registration packet will not be disclosed to persons other than Kama'aina Kids staff unless the parents or guardians of the child grant written permission for the disclosure or an emergency arises.

**PARENT/GUARDIAN SIGNATURE :** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**EMAIL ADDRESS :** \_\_\_\_\_

Keep up-to-date on out of school programs and intersession day camps by signing-up to for our emails.