



D'SCALA Art Academy – Registration Form

Student Name _____

School _____ Grade _____

Address: _____

Date of Birth (MM/DD/YYYY) _____ / _____ / _____ Gender _____ Age _____

Mother's/Guardian Name: _____ Email: _____

Father's/Guardian Name: _____ Email: _____

Home Phone: _____

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

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

EMERGENCY INFORMATION (If Parent is Not Available)

Adult Contact: _____ Relationship: _____

Emergency Phone: _____ Cell Phone: _____

Adult Contact: _____ Relationship: _____

Emergency Phone: _____ Cell Phone: _____

I hereby grant permission for my child to participate in D'SCALA After-School.

I agree that, to my knowledge, my child is physically and medically able to participate in these activities. If any injuries do occur to my child, I also understand that the program directors will respond in the same manner that occurs during regular school hours. The program runs from 2:00 to 7:00. I agree to pick up my child promptly at 7:00. Students must have parent permission to walk home, otherwise parents will be required to COME INTO THE SCHOOL AND SIGN OUT THEIR CHILD. This ensures their safety at all times. If my child is not able to attend a session, I agree to notify either the directors or the school secretary to let them know.

A late pick up fee of \$10 will be charged for every 15 minutes that you are late.

A late payment fee of \$10 will be charged for payments not received by the first day of the service period.

Parent/Guardian Signature: _____ Date: _____



EXIT FROM DE ACADEMY

PERMISSION TO HAVE SOMEONE ELSE PICK UP YOUR CHILD

I hereby give my permission for the following people to pick up my child from the After School Program: Name:

_____ Phone: _____ Name:

_____ Phone: _____ Name:

_____ Phone: _____ Person(s)

NOT Authorized to Pick-Up my child from School:

Name: _____ Phone: _____

Name: _____ Phone: _____

PERMISSION TO WALK OR RIDE A BIKE

_____ I hereby GIVE my permission for my child to walk/ride bike home from after-school sessions.

_____ I hereby DO NOT GIVE my permission for my child to walk/ride bike home from after-school sessions.

Signature: _____ Date: _____



CHILD'S MEDICAL INFORMATION

Any health problems which program directors should know:

Medication, if any:

Allergies, if any:

Special Concerns:

Any activities child should NOT engage in:

Doctor _____ Telephone _____

Insurance _____ Number ID _____

I, the undersigned, do hereby authorize D'Scala teachers to contact directly the persons named on this card and do authorize the named physicians to render such treatment as may be deemed necessary an emergency, for the health of said child.

In the event that physicians, other persons named on this card, or parents cannot be contacted, D'Scala personnel are hereby authorized to take whatever action is deemed necessary in their judgment, for the health of the child.

I will not hold the D'Scala financially responsible for the emergency care and/or transportation for said child.

Signature of Parent(s)/Guardian(s) _____ Date _____



PERMISSION TO LEAVE & RETURN TO D'SCALA

I hereby grant permission to D'Scala to release my child, _____,

For the following purpose:

NAME OF ACTIVITY:

DESTINATION:

TIME OF DEPARTURE FROM D'SCALA: _____ TIME OF RETURN TO D'SCALA _____

TRANSPORTATION ARRANGEMENTS: _____

DATE(S) FOR WHICH PERMISSION IS GIVEN: _____

Signature of Parent/Guardian _____ Date _____



PARENTAL CONSENT FORM FOR STUDENT PHOTOGRAPHS/VIDEOS

Dear Parent/Guardian:

It is our practice to seek parental consent before including your child’s photograph and/or recorded video on D’SCALA web page or in any publications, or to release any images to the media, for the purpose of showcasing the accomplishments of our students, teachers, and staff. In order to release or include your child’s image in any D’SCALA project, we must have your consent. Please review the sections below.

Please complete this form.

D’SCALA has my permission to publish a photograph and/or video image of my child,
_____, for the following:

Section I:

Internal Use of Photographs, Web Page and Video Student photographs/video images may be taken for internal use such as student recognition bulletin boards, school newspapers and newsletters, classroom projects, etc.

Please check one:

_____ I grant permission to use my child’s photograph/video as described above.

_____ I DO NOT grant permission to use my child’s photograph/video as described above.

Section II:

External Use of Photographs, Web Page and Video Student images may be used for external publications such as press releases, print ads, or other D’SCALA publications related to my child’s participation in D’SCALA related and/or extracurricular activities.

Please check one:

_____ I grant permission to use my child’s photograph/video as described above.

_____ I DO NOT grant permission to use my child’s photograph/video as described above.

Parent/Guardian Signature _____ Date _____



TRANSPORTATION POLICY

At D’Scala, we provide convenient transportation for your child. We have designated, labeled and certified vans/buses to transport your child safely from school to our installations as well as on specified field trips. All drivers undergo safety training and a driving history is reviewed to ensure safety.

TRANSPORTATION AND SCHOOL TRANSPORTATION CONSENT

D’Scala. Will assure any vans/buses used are approved by the Safety Standards and all drivers will have appropriate and approved driving records.

*I will contact and advise the teaching staff at D’Scala of any changes for transportation, and will give ample time to meet these changes.

*Due to unforeseen circumstances my child may arrive late for transportation and I will understand that D’Scala will make every effort to transport children on time ensuring safety is a priority.

*At times children may forget or leave belongings at school, in such case the driver will not have time to return to the school to collect them.

*At times transportation may be cancelled due to poor weather conditions.

*It is the responsibility of the parent to notify D’Scala in the given case that one day they go to school to pick up their child and then drop their child at the Academy.

I _____ (parent/legal guardian name) have read and understand the Transportation Policy and The Transportation and School Transportation Consent and give D’Scala the consent for my child _____ to be transported from school to D’Scala installations as well as on programmed field trips.

Parent/Guardian Signature _____ Date _____