



## Before & After School Care Registration Form

EduFirst Technical Academy before and after school care programs runs daily on the school calendar of Fayette County Schools. You can return this form by mail, email or by dropping off the form at our facility. Please note that if you pay bi-weekly, fees are due with tuition on Fridays prior to the Monday start date. If you pay monthly, fees are due with tuition on the 1st of every month.

Before Care     After Care     Both

### PARTICIPANT INFORMATION

Child's Name \_\_\_\_\_

Male     Female    Date of Birth: \_\_\_\_\_

Current Grade: \_\_\_\_\_

Parent(s) or Guardian's Name \_\_\_\_\_

Parent(s) or Guardian's email address(s) \_\_\_\_\_

Parent(s) or Guardian's mailing address(s) \_\_\_\_\_

Home Phone Number \_\_\_\_\_

### TRANSPORTATION:

WHO IS AUTHORIZED TO PICK UP YOUR CHILD? (Please note: Authorized persons must be an adult or an older sibling in high school or above. We will only allow your child to leave with the people you list here. A Photo ID will be required.)

PEOPLE AUTHORIZED TO PICK-UP (PLEASE LIMIT TO 4):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### LIABILITY WAIVER:

By signing this document, I (we) \_\_\_\_\_ agree to the following terms: In case of illness or accident, EduFirst Technical Academy is authorized to secure emergency medical

treatment at my expense. EduFirst Technical Academy reserves the right to dismiss any student who does not show respect for the facility, including but not limited to: property, equipment, policies, other members and staff. Students who are dismissed will not be given a refund of fees paid. EduFirst Technical Academy assumes no responsibility for personal property that is either in or out of lockers. By signing this Before & After School Care Registration Form, I (we) \_\_\_\_\_ hereby waive any and all claims against EduFirst Technical Academy. I (we) \_\_\_\_\_ understand that use of the facilities and equipment at EduFirst Technical Academy may involve risk of bodily injury or property damage and I agree to assume any such risks. I (we) \_\_\_\_\_ understand that it is up to me to consult physicians and other professionals to make sure that the child registered above can safely participate in activities and events at EduFirst Technical Academy. I (we) \_\_\_\_\_ also understand and agree that by signing this Agreement, I (we) \_\_\_\_\_ am giving up my (or the minor for whom I sign) right to make any claim against EduFirst Technical Academy, its agents, employees, and volunteers, including the right to sue them, for bodily injury or property damage or any other loss that I (we) \_\_\_\_\_ might suffer while using EduFirst Technical Academy facilities and services, except as limited by law.

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**NOTICE** - In order to promote a safe and secure environment, EduFirst Technical Academy has placed video cameras within its facility. As part of our commitment to the safety of children and vulnerable persons, EduFirst Technical Academy reserves the right to consult public sources to determine whether any member or guest of any member poses an unreasonable risk of harm to its students, staff, patrons or visitors.

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Parent(s) Signature

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Date

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Parent(s) Signature

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Date

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