



PIERRE TOUSSAINT LEADERSHIP AND LEARNING CENTER

NOTRE DAME D'HAITI CATHOLIC CHURCH

AFTER SCHOOL APPLICATION FORM 2011-2012

Student Information

NAME: _____ DATE OF BIRTH: ____/____/____ AGE: ____
STREET ADDRESS: _____ Apt #: _____
CITY: _____ STATE: _____ ZIP: _____
HOME PHONE: () _____ CELL PHONE: () _____ GENDER(Circle one): M F
CURRENT SCHOOL: _____ CURRENT GRADE LEVEL: _____

Parent Guardian Information

NAME: _____ RELATIONSHIP TO PARTICIPANT: _____
STREET ADDRESS: _____ Apt #: _____
CITY: _____ STATE: _____ ZIP: _____
HOME PHONE: () _____ CELL PHONE: () _____

Is the above person authorized to pick-up my child at the end of each day or in the event of an emergency:

Yes No

Parent Guardian 2 Information

NAME: _____ RELATIONSHIP TO PARTICIPANT: _____
STREET ADDRESS: _____ Apt #: _____
CITY: _____ STATE: _____ ZIP: _____
HOME PHONE: () _____ CELL PHONE: () _____

Is the above person authorized to pick-up my child at the end of each day or in the event of an emergency:

Yes No

Emergency Contact Information

The first attempt will be made to contact the student's parents/guardians. Emergency contacts listed below must be able to pick your child up in the event of an emergency.

Emergency Contact 1

NAME: _____ Relationship to participant: _____

HOME PHONE: () _____ CELL #: () _____ WORK #: _____

Is the Above Person Authorized to Pick-Up my child at the End of Each Day or in the Event of an emergency?

Yes No

Emergency Contact 2

NAME: _____ Relationship to participant: _____

HOME PHONE: () _____ CELL #: () _____ WORK #: _____

Is the Above Person Authorized to Pick-Up my child at the End of Each Day or in the Event of an emergency?

Yes No

Rules and Regulations

I am aware that my child must follow the rules and regulations of the after school program, as follows, and may be terminated from Pierre Toussaint Leadership and Learning Center Program if he or she does not comply.

I will be respectful to others at all times.

I will not use profanity.

I understand that no horseplay is allowed.

I will stay with my assigned team and team leader.

I understand that my parent/guardian may be called to pick me up for continuous disruptive behavior.

NO kicking, hitting, spitting, fighting, or shoving

NO running and NO gum is allowed

NO food is allowed except during lunch or snack time.

Student's Name: _____

Student's Signature: _____

Parent/Guardian Name: _____

Parente/Gurdian Signature: _____

PTLLC is committed to providing an inclusive and welcoming environment for all members of our community and to ensuring that educational and employment decisions are based on individuals. abilities and qualifications. Consistent with this principle and applicable laws, it is therefore the centers policy not to discriminate in offering access to its educational programs and activities or with respect to employment terms and conditions on the basis of race, color, gender, national origin, age, religion, creed, disability, veteran's status, sexual orientation, gender identity or gender expression [1] Such a policy ensures that only relevant factors are considered and that equitable and consistent standards of conduct and performance are applied.