



# Jubilee School

## 2017 – 18 After School Program Enrollment

### Student Information

Name \_\_\_\_\_

School \_\_\_\_\_

School Address \_\_\_\_\_

Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

### Family Information

Mother / Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Email \_\_\_\_\_

Father / Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Email \_\_\_\_\_



# Jubilee School

## PERMISSIONS

### PICK UP (choose one)

<input type="checkbox"/>	Yes, I give permission for my child to be picked up by Jubilee School staff.
<input type="checkbox"/>	No, I will arrange for my child to be dropped off. <i>(Please note students should be dropped off no later than 3:45pm.)</i>

### MEDIA CONSENT (choose one)

<input type="checkbox"/>	Yes, I give consent for the taking and using of still photography / video of my child and me for use by Jubilee School in promotional materials.
<input type="checkbox"/>	No, I do not give consent for the taking and using of still photography / video of my child and me for use by Jubilee School in promotional materials.

Sign up my child(ren) for the following...

**DAILY** · \$20 per day

**WEEKLY** · \$88 per week

**MONTHLY** · \$350 per month

✓ Choose which months you'd like to sign up your child(ren):

- |                                    |                                  |                                   |
|------------------------------------|----------------------------------|-----------------------------------|
| <input type="checkbox"/> September | <input type="checkbox"/> October | <input type="checkbox"/> November |
| <input type="checkbox"/> December  | <input type="checkbox"/> January | <input type="checkbox"/> February |
| <input type="checkbox"/> March     | <input type="checkbox"/> April   | <input type="checkbox"/> May      |

Name of Parent / Guardian \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Submit this application to Jubilee School at  
4211 Chester Ave Philadelphia, PA 19104 or by email to [info@jubileeschool.net](mailto:info@jubileeschool.net)