

2021-2022 BBNS Academy School Registration

Please mail or return forms to 4068 Oakmont Dr. Pontoon Beach, IL or info@bbnsacademy.com

Participant's Information

Child's First Name _____ Last Name _____

Shirt Size: **XS S M L XL 1X**

Sex: M F Date of Birth: _____

Check if your child is enrolled in BBNS Academy After/Before School Program

Parent/Guardian Information

<input type="checkbox"/> Ms. <input type="checkbox"/> Mr.	<input type="checkbox"/> Ms. <input type="checkbox"/> Mr.
First Name _____ Last Name _____	First Name _____ Last Name _____
Home Address _____	Home Address _____
City, State, Zip _____	City, State, Zip _____
Home Phone _____ Work Phone _____	Home Phone _____ Work Phone _____
Email for Confirmation _____	Email for Confirmation _____

Other than you, who can pick up your child?

Relationship:	Name:	Address:	Phone:
Relationship:	Name:	Address:	Phone:

Child's Medical Information

Insurance Company Name	Member/Policy Number
Policy Holder Name	Employer Name

Program Registration Amenities

Here is what you and your child will get when they sign up for our School.....
7 Hours of Daily Instruction
Food- Breakfast, Lunch, and Snacks
Extended Hours Option
Transportation (If Necessary)
Biblical Principles
Making New Lifelong Friends
AND WE ACCEPT CHASI!!!

How did you hear about this program?

Please tell us, in full, about any medical/health, and/or developmental or behavioral conditions, including speech, occupational therapy, or the like, past or present, and any other pertinent information that might aid in the enhancement of your child’s camp experience. Use a separate sheet as necessary. We strive to care for children with various needs, but we need your full input to succeed.

Please list all allergies, current medication(s), vitamins, inhalers, etc. Please note that if your child requires an emergency allergy kit (ie. EpiPen, bee sting kit, or inhaler, etc), you must supply medication labeled with child’s name and detailed instructions on our Permission to Administer Medication form to the office prior to your child’s attendance. Kits are returned if unused.

Permission & Liability Waiver:

My child, _____, has permission to fully participate in BBNS Academy School Program activities during the 2021-2022 School term. I, as parent/legal guardian, do hereby grant the BBNS Academy staff and designated adults the right to authorize emergency medical treatment for my child in the event that I or my designated representative cannot be reached. I agree to hold harmless BBNS Academy and its agents from liability resulting from an accident. The Good Samaritan Law will apply. I hereby grant permission for staff to take whatever steps may be necessary to obtain emergency treatment for my child. These steps may include, but are not limited to, the following:

1. In a life-threatening emergency or urgent situation, staff will call 911 before making any attempt to contact parents.
2. For a non-life-threatening emergency, we will attempt to call the parent/guardian first, and if we cannot reach them, we will attempt to contact the Emergency contacts listed on the Emergency Information form. If we cannot make an appropriate contact, we will call paramedics or the child's health care provider.

I understand that BBNS Academy and staff will not be responsible for anything that may happen as a result of false information provided by parents/guardians, or as a result of the parent/guardian’s failure to provide information at the time of enrollment. I understand that staff will not administer drug or medication without specific written & signed instruction from the health care provider and/or the child's parent/guardian. Enrollment for your child in BBNS

Academy School Program constitutes your agreement to this waiver. I understand that all Emergency Information on the Emergency Form must be completed before my child may attend camp. I have read and understand all policy and procedural information, including discipline, health, payment, and cancellation policies.

Signature Parent/Guardian 1	Date	Signature Parent/Guardian 2	Date
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Print Name Parent/Guardian 1	Print Name Parent/Guardian 2
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Publicity Release Form (optional): I authorize BBNS Academy to use a photograph or other image of my child for public relations purposes connected to this school and future programs associated with BBNS Academy. I understand that my child's name will not be published with an image.			
_____	_____	_____	_____
Signature Parent/Guardian 1	Date	Signature Parent/Guardian 2	Date

BBNS Academy does not discriminate on the basis of gender, race, color, creed, family structure, national or ethnic origin, sexual orientation, age, citizenship, military status, and genetic information in admissions, programs, employment, financial assistance, activities, use of facilities, or privileges.

Excursion & Transportation Consent:

I _____, the parent/guardian, hereby give permission to BBNS Academy for my child _____ for the following:

To participate in excursions involving transportation to locations such as (but not limited to) libraries, parks, pools, schools, playgrounds, museums. I understand and I consent to give BBNS Academy total permission to transport my child for center purposes. I, BBNS Academy, the provider for the above mentioned child will transport the child to all transportation needs. I will use safety seats/ devices necessary and good judgement. This form is valid from the above mentioned date until terminated.

Provider Signature: _____ Date: _____

Parent/ Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Financial Agreement Contract:

This is BBNS Academy financial contact between _____, Parent/ Guardian
And is enrollment for _____ in BBNS Academy School.

Child's Name
This Financial agreement takes place from September 7th, 2021 -May 20th, 2022, with the first enrollment date of _____ . Above signed parent agrees to pay their assigned tuition (Unless under the childcare assistance program).

Payment for services is to be paid Monday morning prior to care for the upcoming month depending on the timing of registration.

Vacations: When Child(ren) take(s) a vacation, parent is required to provide a one week notice prior to vacation.