



Look Up Ministries (LUM) After School Program Registration Form

Student Name _____ (_____) Grade _____
Last First Middle Preferred Name

Address _____ City _____ Zip Code _____

Sex: Male/Female Date of Birth: / / Age _____

Public School District of residence _____

Name of specific school building student attends _____

Does your child have any food allergies? (peanuts, milk, etc.)

Does your child have any activity restrictions? Y/N _____

Do we have permission to use film/photographs of your child for promotional purposes? Y/N

Student resides with _____

Siblings _____ Age _____ Grade _____

_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list any specific custody arrangements the LUC may need to be aware of

Resident Father

Name _____
Last First

Work Phone _____

Cell Phone _____

Occupation _____

Employer _____

Resident Mother

Name _____
Last First

Work Phone _____

Cell Phone _____

Occupation _____

Employer _____

Non-Resident Father

Name _____
Last First

Address _____

Home Phone _____

Work Phone _____

Cell Phone _____

Occupation _____

Non-Resident Mother

Name _____
Last First

Address _____

Home Phone _____

Work Phone _____

Cell Phone _____

Occupation _____

Look Up Ministries After School Program

Emergency Medical Authorization/Clinic Information Card

Students Legal Name _____		Grade _____
Date of Birth _____	Student Resides With _____	Phone _____
Address _____		
Call Order: Name of persons to be contacted in case of illness or emergency		
1. _____	_____	_____
Name	Phone	Relationship
2. _____	_____	_____
Name	Phone	Relationship
3. _____	_____	_____
Name	Phone	Relationship
Allergies _____		

Homework Help- tutoring when needed

My child _____ receives after school homework help and tutoring at the Look Up Center after school club, BLAST. To aid those giving this help I give permission for an authorized representative of Look Up Center Blast Program to obtain a copy of my child's progress reports and interims throughout this school year.

_____ Date

_____ Signature of Parent(s) of Legal Guardians

Parent and Student Agreement

Dear Parents,

Please read over the following rules and consequences for behavior during BLAST after school program. Included are some ways your child may earn points for positive behavior. They will then be able to save and spend their earned points at a special store just for the students.

Earning Points:

1. Random Acts of Kindness
2. Reciting Memory Verses
3. Encourage Someone
4. Attendance
5. Hang Up Coat
6. Wash Hands
7. Bring Homework

Rules:

1. Use Appropriate Language
2. Keep Hands and Feet to Yourself
3. Listen and Respect Your Leaders
4. Leave Electronics and Toys at Home or Check Them in the Office
5. Walking in Hallways and Stairs

Consequences:

- 1st Time- Verbal Warning
2nd Time- Time Out and/or loss of points
3rd Time- Deliberate, Defiant, Extreme Rule Violation Will Result in Call to Parents.

I have read and understand the rules, consequences and reward system for BLAST after school program.

_____ Student Signature

_____ Parent/Guardian Signature