

SPORTS C.L.U.B.

~Your Before & After School Program~

"It's all about choices!"

Directed by Education Professionals

Vineyards Elementary

(Open before school beginning at 6:30AM and after-school until 6:30PM)

*C.L.U.B. - Children Learning Ultimate Balance
between sports, fun activities and academics.*

***Licensed with the Department of Children and Families**

License # C20CO6661

*Also accepting qualified applicants from 4-C (213-1137)

For more information call: 821-7972 or 784-7701

Cost: After-school care cost is \$45 per week or \$10 per day. Payment is due on the first day of the week of your child's attendance. Morning program cost is \$15 per week payable on Monday, regardless of the number of days attending. If payment is not received by 6:30 PM on the first day of your child's attendance, a \$10 late fee will be assessed to your account.

A \$ 20 non-refundable registration fee is due upon registration.

"It's all about choices!"

Sports C.L.U.B. students have the opportunity to choose from 4 to 5 activities provided every 45 minutes. In addition to a nutritious snack and activity choices, we also provide tutoring and a homework study session.

Sports C.L.U.B. Opportunities

Character Education Homework Club Flag Football Golf Soccer Hockey Dance Tumbling
Academic Integration Board Games Basketball Steal the Treasure Arts/Crafts
Wall Ball Dodge Ball Kickball Flag Tag Softball Scooters Ping Pong
AND MUCH MORE!!!

Registration Form

Child's Name: _____ **Age:** _____

Home Address: _____ **Zip:** _____

Parent's Name: _____ **Parent Signature:** _____

Home Phone: _____ **Cell Phone:** _____ **Work Phone:** _____

Emergency Contact & Number: _____ (239) _____

Additional Pick Ups: 1) _____ 2) _____

Email: _____ **Teacher/Grade:** _____ / _____

I hereby acknowledge that participation in Sports Camp / Sports C.L.U.B. and related activities is at the sole discretion and judgment of the parent or guardian and involves the possible risk of personal injury. I, on behalf of my child, hereby assume all such risk. I hereby release and agree to hold harmless Sports Camp / Sports C.L.U.B., owners, directors, students and employees from all claims, actions, damages and liabilities for personal injury or damage relating to, or arising out of any Sports Camp activity except where the injury or damage is caused by the gross negligence of Sports Camp / Sports C.L.U.B. employees.

Signature (Parent or Guardian): _____

Child's Name: _____ **Date:** _____