



# SCHOOL PICK-UP PROGRAM

## Volusia Academy

565 S Lakeview Dr. Unit 101  
Lake Helen, FL 32744

- NAME OF CHILD: \_\_\_\_\_ AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_
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- HOME PHONE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_
- ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_
- FATHER'S NAME: \_\_\_\_\_ LICENSE# : \_\_\_\_\_
- WORK PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_
- MOTHER'S NAME: \_\_\_\_\_ LICENSE #: \_\_\_\_\_
- WORK PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_
- EMERGENCY CONTACT: \_\_\_\_\_ EMER. #: \_\_\_\_\_
- RELATIONSHIP TO CHILD: \_\_\_\_\_
- E-MAIL ADDRESS: \_\_\_\_\_

\*\* (We will be using e-mail for future notices, upcoming events, flyers, etc...) \*\*

### BUS AUTHORIZATION:

I, \_\_\_\_\_ the parent/guardian of \_\_\_\_\_ authorize Volusia Academy to provide transportation from \_\_\_\_\_ School to the Volusia Academy facility for their ***School Pick-up Program***. I understand that Volusia Academy will be providing the safest and most secure method of transportation to and from said locations. I hereby assume full responsibility for said student's personal safety and release all owners, managers, supervisors, and drivers of Volusia Academy from any and all liabilities that may occur by reason of any injury to said student. The risks are fully understood. I hereby agree to the foregoing by my signature hereon.

Parent/Guardian's signature \_\_\_\_\_ Date: \_\_\_\_\_

### ACTIVITIES AUTHORIZATION:

I understand that participation in gymnastics, dance, cheer and/or ninja-fit involves motion, rotation and height in a unique environment and as such carries with it inherent risk of injury. I understand that risks and dangers associated with participation in gymnastics/class events and activities include, but are not limited to, bodily injury, partial and/or total paralysis and even death. I understand that there may be risks not known or reasonably foreseeable at this time.

I understand that VOLUSIA ACADEMY teaches a normal progression of skills that promote the safety of the students. I also understand that VOLUSIA ACADEMY has established rules for safety and that my child must follow these rules. If these rules are broken, my child may be asked to sit out of class.

I, the undersigned parent/legal guardian of \_\_\_\_\_ (student's name), hereby expressly waive any and all claims for any and all damages or loss to person or property which may be caused by act, or failure to act by VOLUSIA ACADEMY and Ken Pfeifauf and/or their agents. I hereby assume full responsibility for said student's personal safety and release all owners, managers, supervisors, and instructors of VOLUSIA ACADEMY from any and all liabilities that may occur by reason of any injury to said student. The risks involved are fully understood. I hereby so agree to the foregoing by my signature hereon.

Parent/Guardian's signature \_\_\_\_\_ Date: \_\_\_\_\_

## PICK-UP AUTHORIZATION:

The following persons are authorized to pick-up my child from Volusia Academy. I will provide written authorization for any other individual to pick-up child/children.

Participating Child's Name: 1. \_\_\_\_\_ 2. \_\_\_\_\_

Adult Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Adult Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Adult Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Adult Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Parent/Guardian's signature \_\_\_\_\_ Date: \_\_\_\_\_

## RULES AND POLICIES:

1. **Payments for program:** A one week deposit for the program is required upon registration. With written notice of discontinuation, this deposit will be used for the final week. Yearly registration is required if not already a member. Yearly fee is \$35.00 which is used to purchase insurance.
2. **Payments:** All After School Pick-up payments must be on automatic payments. If the payment does not go through with the card on file, you must make a payment by Saturday of the week before and update your card on file. There is a one-day grace period (Monday). Any student not paid for by Tuesday at the close of business (8:00pm), we will add a \$5.00 Late Fee.
3. **Absenteeism:** If your child for any reason is not coming for the day, parent must call in or email and inform the front desk no later than 12:00 pm on the day your child is to be absent. Repeated failure to call and inform will result in a \$5.00 fee being charged to your account.
4. **End of day pick-up:** Pick-up should be between 5:30-6:00 pm. If you are occasionally going to be late for pick-up it is the responsibility of the parent to call and inform the front office. Abuse of this policy will result in added fees.
5. **School Closure Day Camps:** When schools are out due to teacher workdays or holidays, we will offer camps for the day at a reduced price for School Pick-up Program participants, since transportation will not be offered that day. Camps will consist of Gymnastics only.
6. **Full week or multiple day Camps:** (Christmas Vacation or Spring Break) there will be no discounts offered for these camps. Participants will use regular offered prices if they wish to participate. There will be NO transportation offered during these camps. Camps will consist of Gymnastics only.
7. **Volusia Academy Closings:** Volusia Academy will NOT offer any programs or camps Labor Day, Thanksgiving Day, Christmas Day, New Year's Day or Memorial Day. Camps will be offered the days before and after Thanksgiving and both weeks of Christmas Break.
8. **Discipline:** Children requiring discipline will be subject to loss of activity. Parents will be notified when this occurs. If behavior is not corrected, a parent conference will be called. If after conference behavior is not corrected, the child will be asked to leave the program.
9. **Choosing classes:** Students will have multiple choices for classes to attend throughout the week. Once a student is enrolled in a class, they are expected to stay in that class for the month, making changes to class schedule only when a new session begins. Please remember that teacher to student ratios are very important and that your child will be filling a spot in the classes they choose.
10. **Students Attire:** It is the parent's responsibility to make sure the student has the appropriate attire for that day's class with them when they are picked up (leotard, dance outfits, shoes, ninja-fit outfit, etc.)

I have read and understand the rules as stated above.

Parent/Guardian's signature \_\_\_\_\_ Date: \_\_\_\_\_