

GameT1me Employee: _____

HOMework 1ST REGISTRATION

Child Name _____

Age _____ LAST FIRST M.I.
Date of Birth ____/____/____ (MM/DD/YYYY)

Member ID: _____

Parent/Guardian _____

Address _____

Street

City

State

Zip Code

Phone _____ E-Mail _____

Relation to child _____

Parent/Guardian _____

Address _____

Street

City

State

Zip Code

Phone _____ E-Mail _____

Relation to child _____

Emergency Contact _____

Emergency Contact's Phone _____

Emergency Contact's Relation to Camper _____

Snack Tab: YES NO Maximum allowance per day: \$ ____.

Free-Time Gaming ESRB Rating: E E₁₀₊ T M

Allowed Exceptions: _____

How did you hear about us?

GameT1me Employee: _____

Pick-up Addendum

The following are individuals that are authorized to check out the child from Homework 1st.

Name: _____

Relation to Child: _____

Contact Number: _____

Name: _____

Relation to Child: _____

Contact Number: _____

Name: _____

Relation to Child: _____

Contact Number: _____

Name: _____

Relation to Child: _____

Contact Number: _____

Late Pick-up Policy

Any child picked up after 6:30 p.m. will incur a \$10.00 late fee and be charged an additional \$1.00 every minute after 6:35 p.m.

GameT1me Employee: _____

Teacher Information (optional)

To better assist your child, GameT1me requests the contact information of a child's teachers. The teachers must have already consented to the parent's disclosure of the contact information.

Teacher: _____

Subject: _____

Email: _____ @ _____

Teacher: _____

Subject: _____

Email: _____ @ _____

Teacher: _____

Subject: _____

Email: _____ @ _____

Teacher: _____

Subject: _____

Email: _____ @ _____

Teacher: _____

Subject: _____

Email: _____ @ _____

GameT1me Employee: _____

Medical Information

Family Physician _____

List of known allergies:

Any known medical conditions:

Medical Information Continued

Current Medications or medical devices and instructions:

Medical Concerns:

Does your child attend public school? Yes No

Can you provide an immunization chart? Yes No

GameT1me Employee: _____

If your child experiences a medical emergency and requires immediate medical care, is there an urgent care provider you prefer?

Medical Release Consent

In the event of a medical emergency, GameT1me has the authority to release my child's medical information to the appropriate parties providing him medical care in the interest of the child's well being.

Parent/Guardian Signature

____/____/_____

MM DD YYYY

GameT1me Employee: _____

Payment Schedule	Payment Amount without commitment	Payment Amount with commitment
Pay-by-Day	15 ⁰⁰	N/A
Bi-Weekly	118 ⁰⁰	98 ⁰⁰
Pay-by-Month	250 ⁰⁰	205 ^{00**}

*No refunds or adjustments are granted for illness, vacation, or when GAMET1ME Homework 1st activities are cancelled due to inclement weather

(We make every effort to open unless our power is out). Customer Initials _____

**First month (August) billed at \$59; Last month (June) billed at \$59 unless snow days are added

Payment Schedule: (Select only one)

- Pay-by-Day: Billed prior to day of attendance
- Bi-weekly: Billed prior to day of attendance
- Pay-by-Month: Billed on the first of each month (Best Price)

Homework 1st Plus

Homework 1st Plus is an extra tutoring program to strengthen writing, reading, & math skills, also aimed at increasing the child's vocabulary.

Additional \$20.00 per week

- I want my child to be included in the Homework 1st Plus program.

Teacher Work Days, Vacations, etc.

GAMET1ME offers each HW1 participant the option to attend All Day Camp when school is out except for Thanksgiving Day, Christmas Day, and New Years Day.

(Hours are 7:30am-6:30pm M-F) If you commit to have your child attend every day this school year, the cost is only \$10 additional per day. If you do not commit, the cost is \$15 per day additional and you can pick and choose the days you want.

- I commit to the All Day Camp for every workday, vacation, etc. at \$10 additional per day
- I will pick & choose what days, if any, my child attends All Day Camp at \$15 additional per day

GameT1me Employee: _____

For staffing purposes, please check the dates your child will be attending All Day Camp. Remember, there is no extra charge for early dismissal days for HW1 participants.

Teacher Workday	Oct. 26	7:30 a.m.– 6:30 p.m.	<input type="checkbox"/>
Thanksgiving	Nov. 25 & 27	7:30 a.m.– 6:30 p.m.	<input type="checkbox"/>
Winter Holidays	Dec. 21, 22, 23, 24, 28, 29, 30, & 31	7:30 a.m.– 6:30 p.m.	<input type="checkbox"/>
MLK’s Birthday	Jan. 18	7:30 a.m. – 6:30 p.m.	<input type="checkbox"/>
Teacher Workday	Jan. 19	7:30 a.m. – 6:30 p.m.	<input type="checkbox"/>
Teacher Workday	Feb. 15	7:30 a.m. – 6:30 p.m.	<input type="checkbox"/>
Teacher Workday	March 24	7:30 a.m. – 6:30 p.m.	<input type="checkbox"/>
Spring Break	March 28, 29, 30, 31, & April 1	7:30 a.m. – 6:30 p.m.	<input type="checkbox"/>
Teacher Workday	April 11	7:30 a.m. – 6:30 p.m.	<input type="checkbox"/>
Early Release	Any	No Extra Charge!	<input type="checkbox"/>

I agree to pay for the Homework 1st/All Day Camp days & periods above at the agreed discounted rates listed. I accept responsibility to pay for my child’s tuition before or the morning of the days my child will attend Gamet1me’s extended hours program. I understand that if my child is absent from those days, I am not entitled to a refund.

Parent/Guardian Signature

____/____/____

MM DD YYYY

GameT1me Employee: _____

By signing, I understand that I will be required to make payments to ensure my child's position in GameT1me's Homework 1st. Failure to do so will result in refused admittance for my child until the payment has been made.

I agree that my child will be enrolled for:

- 1st Semester (Aug. 24 – Jan. 15)
- 2nd Semester (Jan. 18 – June 8)
- Both Semesters (August 24-June 8)

I understand that if my child will be absent from the program, I will still be held liable for paying the remainder of the contracted time.

I authorize GameT1me to charge my credit card for the appropriate payment amounts based on the above schedule I have chosen.

Parent/Guardian Signature

____/____/_____
MM DD YYYY

Parent/Guardian Consent/Agreement/Waiver

I, _____ (Parent/Guardian of Camper), give permission for my child to attend GameT1me's Homework 1st Program, and, I will make sure my child understands the rules of which HW1st is governed by. I also understand that failure to adhere to the Homework 1st rules may result in my child's suspension and/or dismissal from Homework 1st without refund or recourse.

By signing below, I also release GameT1me, its employees, and associated parties from liability of any injury, death, personal loss or damage to property to my child or myself. I understand that medical personnel are not available on site, and will allow GameT1me to contact an emergency medical response team if my child's emergency contact or I am not available for contact.

Parent/Guardian Signature

____/____/_____
MM DD YYYY

GameT1me Employee: _____

Credit Card Information

Name: _____

Card Number: _____

Expiration Date: ____/____ CVV: _____

Billing Zip Code: _____

Homework 1st Agreement

I, _____ (Homework 1st Gamer), agree to behave a manner that is deemed acceptable by GameT1me. This pertains, but is not limited to, appropriate language and word choice, physical contact of staff and fellow participants, and personal conduct. I will follow the rules of GameT1me and the instructions of GameT1me Employees to the best of my abilities.

Camper Signature

____/____/____
MM DD YYYY