

After School Activities Waiver

Child's Name _____ Grade _____

Activity Name _____

Day of the week Activity is held _____

Start Time _____ End Time _____

Start Date _____ End Date _____

My 1st through 5th grade child will be attending an after school activity at Willow Glen Elementary School. My child will go straight to the after school activity from their classroom, and when the activity is completed, my child will walk to WGCEDEP to sign in. I understand that WGCEDEP staff will not be able to take my child to the after school activity stated above, nor will they be able to pick my child up from this activity. It is my child's responsibility to attend this class, and return back to WGCEDEP.

****Kindergartners and Transitional Kindergartners will be walked to their after school activity by a W.G.C.E.D.E.P. staff member. After said activity, the child will be dropped off at W.G.C.E.D.E.P. by the after school activity instructor. ****

I _____ (Parent Name), am releasing liability from W.G.C.E.D.E.P. to care for my child until my child arrives to W.G.C.E.D.E.P. from their scheduled after school activity and signs into the program.

Parent Signature _____ Date _____