



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

Dear Parent/Caregiver,

Thank you for your interest in our Parents Night Out Programs at AAC Aprendiendo a Color, LLC. We are excited that you and your family are considering utilizing our services. In order to participate in this event, we must have a registration form on file for each individual interested in attending (this would include typically developing siblings for Parents' Night Out). Please be advised that it is for the safety of your loved one, the other individuals in the program, and our staff that the registration forms are thoroughly completed are attached. Should we not receive all pertinent information, admissions into the program may be delayed. The registration form contains basic information needed for all AAC Programs.



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

Parent/ Guardian information

Mom's Name: _____ Mom's Cell Phone: _____

Dad's Name: _____ Dad's Cell Phone: _____

Home Address: _____

City: _____ Zip Code: _____

Email Address: _____

Student (Please make additional copies of this page for additional children)

Student Name: _____

M/F: ____ DOB: _____

Child Care/Elementary, High School Attending: _____

Other pertinent information about this student?



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

Allergies or medical conditions.

Please list any known medical conditions or allergies, food or non-food items:

Pick - up and emergency contacts other than parents.

I authorize the following individuals to pick-up my child, and serve as an emergency contact (18 or over):

(1) Name: _____ Relationship: _____

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



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

(2) Name: _____ Relationship: _____

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

Class or camp selection

Parents' Night Out:

Day of the week: _____ **Hours:** _____

Location: _____

Language: Spanish _____ English _____



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

Parents' Night Out Guidelines*

To ensure a safe, enjoyable environment for everyone, the information below outlines our guidelines. These are subject to change with or without notice.

The program is from 6:00 pm - 10pm. It is offered every Friday of June, or as outlined by the online calendar found on our website.

- Snack (usually Goldfish, Pretzels, Vegetables, Fruit, ect.) with a drink. If you want to bring your child's snack you may do so. Our facility is capable of refrigeration, preparation or heating. Please label anything brought with your child's full name and preparation directions.

- Snack approximately starts around 8:00PM and is a combination of cheese or pepperoni pizza, sandwiches and another food vendor such as Chick-Fil-A (please verify with facility). If you do not want your child to participate in the dinner that is included, please provide a sack lunch or snacks. Please label anything brought with your child's full name and preparation directions.

- All children must be fully potty trained. Ages 4-12 years.

- Each child must bring or wear a pair of socks. You are more than welcome to bring in a pillow or sleeping bag to this event.

Please note that we are not responsible for any lost or stolen items.

If given a 48 hour notice, we can switch your prepaid registration to a future date. Sorry, no refunds are given. There are no refunds for children that are removed from the program due to any behaviour that is harmful to others children, persons or themselves.

- Please do not bring your child if they are sick. We will not allow children that are sick to be dropped off; any child that becomes ill during the program will be to be picked up as well.

- All children will need to be signed in and out by an approved parent/guardian each day. The sign in/out sheet will be in the lobby or pick-up area. A photo ID will be required at pick-up.

- Please make sure that your child is in comfortable clothing. No jeans. All participants must also have socks.

- Late Pick Up: \$15 for the first 15 minutes. \$2 per minute for each additional minute after 15



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

Parent/Guardian Signature: _____ Date: _____

AAC Exemption notice*

** One form is needed per child.*

I, _____ have been informed and understand that this program is not a licensed childcare facility. I acknowledge and understand that the program is not required to be licensed by the Georgia Department of Early Care and Learning. I acknowledge and understand that this program is exempt from state license requirements.

Parent name (Print)

Date

Parent signature



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

Release Photo, Audio, Video recording, Artwork*

** One form is needed per child.*

AAC routinely takes photographs and/or creates audio or video recording of its students as they are participating in AAC programs. AAC uses photos of its members on its website and publicity for the school. AAC may also have occasion to utilize children's artwork for similar external educational purpose and publicity. A student's image and / or artwork may, dependent upon below authorization, be externally released, but only for news, or publicity purposes to benefit AAC.

Child's name: _____

Parent Initial

_____ I hereby grant AAC, the right, without fee, to make edit, use or display photos and /or video recordings of my child. I agree that the image may be used in any form of written or electronic media, now existing or created in the future, including, but not limited to, standard print, websites. Every precaution for student safety is taken. Students' names and personal information are never posted in conjunction with the photograph.

_____ I hereby grant AAC, the right, to use, or display my child's artwork which is/has been created during AAC programs. I agree that the artwork may be used in any form of written or electronic media, now existing or created in the future, including, but not limited to, standard print, websites. I further understand that my child's artwork will not be identified by name without my further parental consent.



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

_____ I do not grant permission to AAC to use my child's images or artwork externally for any purpose.



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

Acknowledgement of receipt of AAC Parent Handbook

This is to acknowledge that my family has read the AAC Parent Handbook (found at <https://www.aprendiendoacolor.com/parents-night-out>). I understand that it contains important information on the general policies of AAC.

I will familiarize myself with the material in the Parent Handbook. I further understand that AAC may change, rescind, or add to any policies, or practices described in the Parent Handbook at any time, with or without prior notice.

I have discussed the contents with all members of my family who will be participating at AAC. By signing this document my family consents and agrees to abide by the policies and procedures of AAC.



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

Payment Information

We prefer that all participants are pre-registered prior to the date of the event. This is to help us plan accordingly and to save you money! Great!

- I have pre-paid online
- I will be paying in cash upon arrival
- Please use my credit card information below. I would like to be charged upon arrival. We gladly accept Visa, Master card, or Discover. No personal checks

Credit Card #:

Expiration Date: _____ Billing Zip Code: _____ CVC Code:
Authorization _____

Signature: _____ Date:



Parents' Night Out Guidelines
Interactive, bilingual, academically, accelerate, after school program
404.740.8900

Financial Obligation Agreement

I have seen the financial obligations associated with participation in AAC (see AAC Handbook at <https://www.aprendiendoacolor.com/parents-night-out>).

I am aware that fees are payable in advance. All fees for classes, camps, or parties are non-refundable and due by four continuous class.

Date

Parent signature