



After-School Program at Stingers
Youth Membership Registration Form
MEMBERSHIP IS FREE TO ALL YOUTH GRADES 7-12

Tuesdays from 2:30pm till 5pm
*(*students are free to leave earlier)*

First Name: _____ Last Name: _____

Age: _____ School: _____ Grade: _____

Please list any *serious* medical conditions/allergies you may have (i.e., seizures, anaphylaxis etc.):

IN CASE OF EMERGENCY *we need to know who to call! *****

Name of Parent/Guardian(s): _____ Relationship to You: _____

Phone Number: _____

We're glad you are joining us! We kindly ask that you respect our guidelines to ensure a fun and safe afterschool program for all:

1. Be respectful to After School Program staff, volunteers, other students and to the Stingers Property.
 2. If you are under the influence of ALCOHOL and/or OTHER DRUGS do not attend. If we have good grounds to believe you are under the influence of alcohol and/or drugs you may be asked to leave.
 3. Once you leave the program you cannot re-enter unless given permission by the program Coordinator.
 4. Follow any COVID rules and precautions put in place.
 5. IMPORTANT: Those students who choose not to respect Staff, Volunteers, and/or the property may be asked to leave.
- We periodically take photos / video for promotional purposes. By signing this document, you agree to allow us to use these photos and/or videos. **IF YOU DO NOT** want to have your picture posted on social media, please put an "X" here:

I understand my responsibilities as an After-School Program member.

Student Signature: _____ Date: _____

I have read and understand this registration form:

Parent/Guardian Name: _____ Signature: _____ Date: _____

Links for more info:

[After School Program at Stingers – RNJ Youth Services](#)

[After School Program at Stingers - Home | Facebook](#)

Contact: info@rnjyouth.com / 613.342.4238

Please submit in person at program.