

Dixon Middle School

After School Program Registration Form 2018-2019

PLEASE CHECK THE CLASSES YOU WILL TAKE

Monday	Tuesday	Wednesday	Thursday	Friday
Homework Lab	Homework Lab	Homework Lab	Homework Lab	Homework Lab
Girls Empowered**	English 7 ICan Support	Drama*	Math 7 ICan Support	Science 7 ICan Support
Drama*	English 8 ICan Support	Basketball*	Math 8 ICan Support	Science 8 ICan Support
TSA (Technology Student Association)	Tech Theater*	Open Lab*	Cooking*	Drama*
Science Olympiad*	Seaperch*	Robot Building*	Computer Skills & Games*	RPG (Role Playing Games)*
	Science Olympiad*	PALS (Positive Action Leads to Success)		Soccer*

*Enrichment Classes **Character Development Classes

Cost: All academic classes (Homework help and Support classes) are free. There is a \$10 fee for enrichment classes and character development classes that covers all enrichment and character development classes for the school year.

Times: Snacks are provided free of charge from 3:05-3:20 PM for Dixon Middle School students. Classes will run from 3:20-4:45 PM. Students must be picked up by 4:45 PM. If the student's ride will not be able to pick him/her up by 4:45 PM, the parent must find another ride for the student.

Before School: From 8:00 AM-9:10 AM Mondays and 7:00 AM-8:00 AM Tuesdays-Fridays, students may go to room 115 to play Wii games or work on homework.

Student's Name _____

Transportation: Please mark one

- My Child should be released to walk home or meet me at my car each day between 4:15 and 4:45
- My child will ride the bus home each day
- I will come into the building and sign my child out at the Main Office each day

My student has permission to check himself/herself out early. Parent Signature _____

Parent Phone Number: _____

I have read the After School Program Rules and Policies on the back of this page and reviewed it with my student.

Parent Signature: _____

By signing this form, I agree I will follow all school rules and policies of Dixon. I understand that failure to comply with Dixon's school rules may result in not being allowed to participate in After School Programs.

Student Signature _____ Parent Signature _____

Please return this form with the \$10.00 payment (if applicable) to Mrs. Hunt in the Main Office.

For office use only Rec# _____ Date _____ Initials _____

This institution is an equal opportunity provider