



BOYS & GIRLS CLUBS
OF NORTHEASTERN PENNSYLVANIA

After School Shuttle Program

Please Print!!

Child's Name:

Parent/Guardian Name:

Phone #:

School:

Grade:



BOYS & GIRLS CLUBS
OF NORTHEASTERN PENNSYLVANIA

After School Shuttle Program

Personal Information about Parent/Guardian

Name:

Address:

Home Phone #:

Cell Phone #:

Date of Birth:

Occupation/Position:

Employer:

Address:

Work Phone #:

Spouse/Significant Other

Name:

Address:

Home Phone #:

Cell Phone #:

Date of Birth:

Occupation/Position:

Employer:

Address:

Work Phone #:



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After School Shuttle Program

Child Care Authorization

The undersigned _____, parent or legal guardian of below mentioned dependant, hereby grant The Boys & Girls Clubs of Northeastern Pennsylvania / Gene Tranovich Transportation, Inc. and driver of record the authority to take temporary care of the following dependant during transportation.

This grant in temporary authority shall begin on the ____ day of _____. It shall remain in effect until terminated by written request by the undersigned. The above named caretakers shall have the following powers:

- The power to transport to and/or from specified points
- The power to seek appropriate medical treatment or attention on behalf of above named child as my be required by the circumstances. These include, but are not limited to, medical doctor, hospital visits, and/or topical first aid.
- The power to authorize medical treatment or medical procedures in an emergency situation.

Date: _____

Signed by parent or legal guardian: _____

Boys & Girls Clubs
of Northeastern Pennsylvania

Parent/Legal Guardian



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After School Shuttle Program

Household Family Size	2008/09 Annual Income for Eligibility	2008/09 Monthly Income for Eligibility
1	\$0 – 19,240	\$0 – 1,604
2	\$0 – 25,900	\$0 – 2,159
3	\$0 – 32,560	\$0 – 2,714
4	\$0 – 39,220	\$0 – 3,269
5	\$0 – 45,880	\$0 – 3,824
6	\$0 – 52,540	\$0 – 4,379
7	\$0 – 59,200	\$0 – 4,934
8	\$0 – 65,860	\$0 – 5,489
For each additional member add	\$6,660	\$555

These guidelines are based on the standards set by the federal government for use in the school lunch program.

****I verify that my child is eligible for the reduced lunch program.**

Parent/Guardian



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OF NORTHEASTERN PENNSYLVANIA

After School Shuttle Program

Power Hour is our after school homework assistance program. Each day when your child arrives at the Club, the program is offered to all members. To this point, attendance has been optional and you can select to continue this practice, allowing your child to attend if they have homework or would like assistance with study skills.

We have another option for this year, you can opt to mandate attendance in the program. If you choose to do so, your child **MUST** automatically go to the Power Hour program every day.

_____ When my child arrives at the Club after school, **I DO** want them mandated (they must attend) to Power Hour, the homework assistance program.

_____ When my child arrives at the Club after school, **I DO NOT** want them mandated (they will have the option to attend, but are not required to attend) to Power Hour, the homework assistance program.

Child's Name

Parent/Guardian