



Andalusia City Schools
After-school Program
Grades K-8



Free of Charge

Transportation provided to the Woodson Learning Center from
AES and AJHS .

Dates: January 6th-May 21st, 2015

Program Time: Mon.-Fri. 3:00-6:00 p.m.

It is the parent's responsibility to pick up their child from the
Woodson Learning Center before or at 6:00 p.m. There will be a
fee charged for any child picked up after 6:00 p.m.

This program will include a variety of different activities for the
children such as tutoring/homework help, recreational athletics,
computer concepts, the arts and home economics to name a few.
The children will enjoy a snack provided by the school nutritionist
each afternoon.

If you would like your child to participate in the after-school
program, fill out the attached A.P.P.L.E. registration form and
have it returned to teachers by November 7, 2014.

Contact:
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Registration Form

Birthdate: _____ Sex (circle one): Male or Female Age: _____

Last Name: _____ First: _____ MI: _____

Preferred Name: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Other: _____

School: _____ Grade: _____

Father's Information: (if applicable)

Last Name: _____ First: _____

Home Phone: _____ Work: _____ Cell Phone: _____

Email Address: _____

Mother's Information: (if applicable)

Last Name: _____ First: _____

Home Phone: _____ Work: _____ Cell Phone: _____

Email Address: _____

Emergency Contact (other than parent): _____ Phone: _____

Note any Medical Issues or Allergies: _____

I give permission for my child to attend the A.P.P.L.E after-school program. I understand that my child will be transported to the program on an ACS school bus and that I will be responsible for picking my child up from the program everyday before 6pm or I will be charged a late fee. I understand that my child may be suspended or expelled from the program at anytime due to misbehavior or discipline issues as determined by the Program Director or LEA Coordinator. I understand that if my child is suspended from school, then he/she is also suspended from the A.P.P.L.E program. I give my permission for staff from the A.P.P.L.E program to discuss my child's academic program with the Andalusia City School' staff to ensure seamless instruction and tutoring. I also give permission for my child to be photographed and video taped for use in projects, brochures, and media releases.

Parent/Guardian Signature: _____ Date: _____