



DPCS AFTER-SCHOOL PROGRAM SPORTS: BASKETBALL
Application: K5-6th Grades
PRACTICE BEGINS THURSDAY, DECEMBER 5TH
Practices: THURSDAY'S & Friday's
3:15 – 4:30 P.M.

DP Christian School
 27100 Girard St., Hemet, CA 92544
 (951) 763-8767 * info@dpskids.com

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Birthdate: ____/____/____ ___ Boy ___ Girl Age ____

Grade (Circle One): K5 1 2 3 4 5 6

Parent / Guardian Name: _____

Phone: _____ Email: _____

Education

School: _____ City: _____

Health

Does your student have any health concerns we should be aware of? ___ Yes ___ No

(If yes, please explain):

Check any that apply: ___ Food Allergies: _____
(explain where needed) ___ Other Allergies: _____
 ___ Epi-Pen for: _____
 ___ Takes Medication at home: _____
 ___ Has a school IEP or 504 Plan

Emergency Contacts: (Emergency Contacts may also pick up students)

Please list two emergency contacts.

Full Name: _____ Relationship: _____

Address: _____ Phone: _____

Full Name: _____ Relationship: _____

Address: _____ Phone: _____

Payments

- Cost is \$60 per student.
- Registration Fee is due with the application. Students may not start without both turned in.
- Enrollment is based on availability.
- No refunds after the first week of attendance.
- Enrollment of DPCS After School Program Sports is by season, and students must re-enroll for programs thereafter. Applications and payments are non-transferable.
- Students of DPCS will be checked into Extended Care if they are not picked up 10 minutes after practices end. Extended Care cost is \$13 per day per student and will be billed at the end of each month.
- Non-DPCS students must have a parent or guardian on campus during practices, be picked up on time, or risk being unenrolled in after-school sports.
- Payments can be made by: Cash, Credit (paid in the office), or Check (Made to DPCS).

Code of Conduct

Students and/or parents/guardians may be asked to leave (*without refund*) if they do not follow the rules of conduct.

Students Are Expected To:

1. *Show reverence for God.*
2. *Respect and obey all teachers, aides, staff members, and others in authority. This includes courteous speech (no profanities) and prompt and cheerful obedience.*
3. *Show respect for the rights of others.*
4. *Respect and take care of all school and church property.*
5. *Have all personal property clearly labeled.*
6. *Use equipment properly at all times.*
7. *Display positive Christian character behavior.*

Students Are Not Permitted To:

1. *Harass or make fun of others, use profanity or vulgarity.*
2. *Be inside buildings without teacher supervision.*
3. *Play in or near the classrooms.*
4. *Chew gum on school grounds before, during and after school or at any school-sponsored activity.*
5. *Throw rocks or wood chips.*
6. *Deface or vandalize school, church property, or property where they are practicing or play a game. Parents must pay for any damage resulting from the irresponsible behavior of their child toward school, church or another student's property.*
7. *Climb any fencing on or surrounding the school and church property.*
8. *Climb on or around any building or roof on the school and church property.*

Agreement

DPCS reserves the right to deny an application based on documented school behavior or grades.

The DP Christian School admits students of any race, color, and national or ethnic origin.

This application and the signature below certifies that I have agree to the above said student to be enrolled in DPCS After School Program Sports. We (student & parent/guardian) understand that said student may be asked to leave the sport for any conduct that does not align with the DPCS School conduct. Parents/Guardians conduct may also affect the said student enrollment in the program.

Parent/Guardian Signature

Date

**PRACTICES WILL BE K5-6TH GRADES: THURSDAY'S & FRIDAY'S, 3:15-4:30 P.M.,
FIRST GAME DATE WILL BE ANNOUNCED AFTER PRACTICES BEGIN.
PARENTS ARE RESPONSIBLE FOR SPEAKING WITH COACH CARTER IF THEY NEED TO KNOW OF A
SCHEDULE CHANGE.**

[COST IS \$60 PER STUDENT]

_____ I am paying by cash

_____ I have attached a check

_____ Please add to my tuition account (DP Christian School students only).