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## ***Before- and After-School Program Enrollment Form 2019-2020***

The Education Department is offering a Before- and After-School program for any enrolled Tribal member or recognized descendant who is currently enrolled in elementary school through high school.

Our before school program offers breakfast from 7:30 a.m. to 8:30 a.m. Our after school program offers after school snacks and open gym play from 4:00 p.m. to 6:00 p.m. Monday through Friday at the Community Center.

**Please note:** *Schedules can vary and may be subject to change depending on the student's needs, holidays, and/or school calendars.*

### **STED Before- and After-School Program Policy**

As a student, attendee, volunteer or staff member of the Stillaguamish Tribe Before- and After-School Program, please follow our **BIG 5** expectations:

1. **Be Kind**-Use kind words, actions and manners
2. **Be Safe**-Walk at all times in designated areas
3. **Be Aware**-Keep hands, feet, and objects to yourself
4. **Be a Listener**- Listen to and follow directions
5. **Be Appropriate**-Use appropriate voice level, language and tone

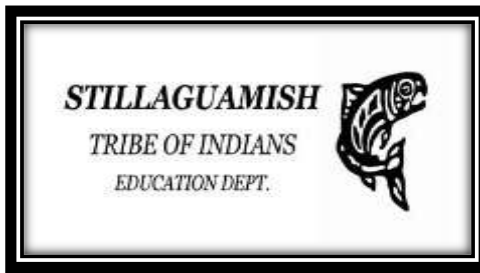
Out of courtesy, outside food and drinks are prohibited inside the Education Department to avoid any potential food allergies.

Transportation to and from the Community Center is the responsibility of the parent/guardian. Please pick up your child(ren)/dependent(s) at or before closing at 6:00 p.m. In the event that you are running late to pick up your child(ren)/dependent(s), please contact the Education Department ASAP.

Thank you!

Education Department





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***Before- and After-School Program Enrollment Form  
2019-2020***

<b>Child Name:</b> _____	<b>Grade:</b> _____
<b>School:</b> _____	
<b>Parent/Guardian:</b> _____	<b>Phone Number:</b> _____
<b>Address:</b> _____	
<b>Email:</b> _____	
<b>Emergency Contact &amp; Phone Number:</b> _____	
<b>Known Allergies:</b> _____	

I have read and accept the terms and conditions stated herein and acknowledge that this enrollment form is binding.

I have read and discussed with my child(ren)/dependents the Stillaguamish Tribe's Before- and After-School Program enrollment form.

**PARENT/ GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

If you have any questions or concerns please contact the education department at 360-631-5592. We look forward to hearing from you!

Please return this form to the Education Department or mail to the address below:

**Stillaguamish Tribe of Indians Education Department**  
3322 236<sup>th</sup> St. NE  
Arlington, WA 98223

