ALBUQUERQUE CHRISTIAN SCHOOL



4931 McLeod Rd. NE Albuquerque, NM 87109 (505) 872-0777 acsrams.org

Dear Parents,

It's time once again to sign up for the ACS Summer Ram Club. Our Ram Club staff is currently preparing for this year's summer program. We are excited about the upcoming summer program and all of the fun activities we will be incorporating into the schedule. In order to complete these preparations, we need to know how many children to anticipate.

- 1. Registration: After completing the registration paperwork, please come to the ACS Business Office to submit your registration and reserve a space for your child. *Registration fee of \$30 must be paid before attending ACS Summer Ram Club*.
- 2. Payment Policy: The rates for Summer Ram Club are as follows:

	ACS Registered Students	Non Registered Students
Pre-Paid Daily Drop-In Rate	\$50/day	\$55/day
Pre-Paid 10-Day Punch Card (Nonrefundable)	\$400	\$475

* Summer rates INCLUDE an activity fee which covers all activities, snacks and crafts.

- 3. Field Trips: Permission slips will be required for your child to attend field trips. Please be sure to arrive by 8:45 a.m. on field trip days.
- 4. Your current Ram Club package covers through May 27th 2022 and summer rates will begin Wednesday, June 1st, 2022.
- 5. Closures: Summer Ram Club will be closed on May 30th-May31st in observance of Memorial Day and July 1st and 4th in observance of Independence Day. Our last day of Summer Ram Club will be July 29th. The first day of school is August 10th.

It is our goal to provide each child participating in our summer program with a safe and fun environment while in our care. We are looking forward to a God filled, exciting and relaxing summer.

In His service,

Suzette McCarthy ACS Childcare Director

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2021 ACS SUMMER RAM CLUB REGISTRATION

	STUD	ENT INFORMATION		
Student's Name (Last):		_ (First):	(MI):	Goes By:
Student's Address:				
(street)				(city)
(zip) Student's Home Phone:	Stud	ent's DOB:	Gender (I	ለ/F): T-Shirt
Size:			、	,
Ethnicity (Please circle): Africa	an American, Asia	an, Hispanic, Native	American, Caucasia	n, Other:
Church Affiliation (Optional):				
		Denomination /	Congregation	
Grade for 2020-2021 School Yea	ır: Scho	ool Last Attended:		
		(If	out of state, please	include city and
state)		(
	REGISTI	RATION INFORMATIO	N	
	RECIDIT			
We anticipate needing Summer	Ram Club on a r	egular basis for the	following days of th	e week. Please circle
all that apply. Monday Ti	uesday	Wednesday	Thursday	Friday
We will need summer camp dur	ing these hours:			
We anticipate NOT needing sun	nmer camp durin	g these dates:		
	FINAN		/	
	T INAIN			
Last Name:	First Na	ame:	Home	Phone:
Address:			Cell I	Phone:
(Street)		(City)	(State)	(Zip)
	PARE	ENT INFORMATION		
		(First):	Cather -	
Father's Name (Last):		(FIrst):	Father	s nome phone:

Father's Address:

	(Street)		(City)	
(Zip) Father's Place of Employment:			Work	Phone:
 Mother's Name (Last):	(Firs	st):	Mother's Home	Phone:
Mother's Address:				
	(Street)			– (City)
(Zip)				
Mother's place of employment			Work phone	
	SIGNA	ATURE		
I hereby certify that all or the abo (Signature of parent) (Date)	ove information is tru	e and correct to the	best of my knowleds –	ge.
	MEDICAL IN	FORMATION		
Physician's Name:		Physician's I	Phone Number:	
Hospital Preference:				
Does this student have allergie	s? Yes No	If yes, please lis	st:	
If your child takes emergency	allergy medication	n (i.e.: Epi-pen) we	e must have an all	ergy action
plan signed by a physician on	file.			
Does this student take any pres		ns, i.e., inhalers, in	sulin, behavior mo	difiers?
Yes No If yes, plea		, , , ,	,	
Will medications listed above b	be administered at A	ACS? Yes No	If yes, you	u must
provide a medical order signe	d by child's physic	ian with administe	ring instructions.	
Does this student have any hea If yes, please describe	lth concerns, i.e., a	asthma, diabetes, o	r seizures? Yes	No

Does this student have any handicap or disability that may necessitate special care at school?

Yes _____ No _____ If yes, please describe _____

LOCAL CONTACTS

In case of emergency and I cannot be reached, please contact:

#1			
	(Name)	(Relationship to student)	(Phone numbers - specify cell, work,
and home) #2			
and home)	(Name)	(Relationship to student)	(Phone numbers - specify cell, work,

CONSENT FOR EMERGENCY MEDICAL TREATMENT: In case of accident or sudden illness, and in the event that I cannot be reached by telephone, I hereby authorize a representative of Albuquerque Christian School to refer my child to the above named physician, to transport my child to a medical facility, or to seek other emergency treatment as deemed necessary.

(Signature of parent/guardian)

(Date)

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2021 ACS SUMMER RAM CLUB STUDENT CONTRACT

"Even a child is known by his actions, by whether his conduct is pure and right." Proverbs

20:11

As a student of Albuquerque Christian School, I agree to: (Please initial each item.)

- Conduct myself according to the highest Christian standards of respect for others with honesty, integrity, and responsibility _____
- Show proper respect for those in positions of authority _____
- Show respect for peers, school property, and school personnel ______
- Refrain from lying, cheating, stealing, gossiping, and fighting _____
- Refrain from using vulgar or profane language, or calling students or school personnel inappropriate names _____
- Refrain from bringing offensive and/or disruptive items to school ______
- Uphold the school uniform dress code _____
- Follow the standards of conduct outlined in the student handbook which include (but are not limited to) those listed above _____

I have read and understand the above Student Contract. By signing this contract, I agree to do my best to abide by all of the above standards of conduct while I am a student at Albuquerque Christian School. I understand that failure to do so could result in my being asked to withdraw from the school.

"Whatever you do, work at it with all your heart, as working for the Lord, not for men." Colossians 3:23

* Student Signature (4th grade and above)

Designated ACS Representative Signature

* Parent/Guardian Signature

Student's Name

(Date)

* Student signature **and** parent/guardian signature are required for students 4th grade and above. For younger students, only the parent/guardian signature is required and indicates that the adult signing the contract has discussed these items with the student in an age-appropriate way.

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2021 ACS SUMMER PARENT/GUARDIAN CONTRACT

"Train a child in the way he should go, and when he is old he will not turn from it." Proverbs 22:6

As parent(s)/guardian(s) of the Albuquerque Christian School student named below, I/we agree to: (please initial each item)

- Support the school and assist the student in abiding by the standards of conduct outlined in the student handbook _____
- Reinforce the reasoning behind school rules and policies ____
- Support the school's right and responsibility to discipline according to school policy _____
- Ensure that the student is at school on time, rested, and ready to participate _____
- Actively participate in the education of the student by reviewing the student planner daily, supervising homework, and encouraging the student to study for examinations _____
- Attempt to respectfully resolve any conflicts or misunderstandings with the teacher, other ACS employees, or parents of other students first; then, if necessary, work with the principal on unresolved issues _____
- Respect the teacher's schedule, remembering that impromptu meetings at drop off or pick up time may distract the teacher from his/her responsibilities with the other students _____
- Refrain from participating in gossip or discrediting of the school or its faculty/staff ______

Parents/guardians must understand that their personal conduct does influence their children and, as such, they are expected to set an example for the conduct of their children in accordance with Biblical principles. It is the desire of ACS to have the school and the families work together in the spiritual growth and educational process of each student enrolled.

I/we have read and understand the above Parent/Guardian Contract and agree to the policies and procedures in the student handbook. I/we realize that noncompliance with these policies and procedures could result in withdrawal from the school.

* Parent/Guardian Signature

Designated ACS Representative Signature

* Parent/Guardian Signature

Student's Name (Printed)

Date

* Signature of both parents/legal guardians is preferred.