

[Office use only]

Program Date: June 10 – July 26, 2024

Date/Amount paid: \_\_\_\_\_ **New or Returning** \_\_\_\_\_

### Cherry Hill Missionary Baptist Church

504 Church Street / Post Office Box 1088  
Conway, South Carolina 29528  
(843) 248-4900 (Office) (843) 248-5640 (fax)

Reverend James H. Cokley DMin. Senior Pastor  
chmbc@cherryhillconway.org

Website: [www.cherryhillconway.org](http://www.cherryhillconway.org)- SCEP Email Address: [denise.armour@cherryhillconway.org](mailto:denise.armour@cherryhillconway.org)

**Registration fees are \$200.00 per child. All fees must be paid no later than June 10th or as soon as your child begins the program. Secure your spot today with a \$50 enrollment fee, which will be deducted from the overall rate.**

### 2024 Summer Cultural Enrichment Program Registration Form

“Where God’s Children Grow Spiritually, Culturally, Socially and Academically One Day at a Time”

Complete the following information for each child you are registering: (Ages: Primary-Middle School)

Name	Gender {M/F}	Birthday	Present Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Father or Guardian \_\_\_\_\_ Work or Cell Number \_\_\_\_\_

Mother or Guardian \_\_\_\_\_ Work or Cell Number \_\_\_\_\_

#### Special needs:

Are any drugs or medication required to be given during the hours of this program? \_\_\_\_ If diet restrictions, please have your child’s physician complete the Diet Restriction form and return the signed form to us within 10 days of the programs opening. ***This is a state department of Social Services guideline necessary for your child to participate in the food program. (Please ask for the form should you need to have one signed by your child’s physician.)***

**How will your child(ren) get to and from the site each day?**

**(Designated stops to be determined.)**

\_\_\_\_\_walk \_\_\_\_\_car \_\_\_\_\_church bus (**designated stops only**) \_\_\_\_\_someone will pick-up

(Please list all persons **authorized** to pick up your child from this site):

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**Bus Pick up /Stop Location:**

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Any additional information we may need to know about your child:

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**Emergency Procedures**

In the event of illness or injury during program hours, an emergency care procedure will be followed. A staff member will make every attempt to contact the parents or guardian. If no one can be reached, the three (3) emergency numbers listed below will be called. If none of these persons can be reached the site, then contact the child's doctor. All expenses incurred are the responsibility of the parents.

**Emergency contacts:** (list name and phone numbers both home and cell if appropriate)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Child's doctor's name address and phone number:

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# Bus Rules

The following rules will govern the conduct of students on the bus. To help youth remember the rules, we have used the same bus rules as outlined in the **Parent -Student Handbook used by the Horry County Schools.**

1. Students must be on time at the bus stop.
2. Students should not run alongside bus when bus is moving.
3. Students should go to their seats without pushing or crowding.
4. Students should remain seated while the bus is in motion.
5. Students must never extend arms, legs, or head out the bus; nor should they throw objects from bus windows.
6. Except in an emergency, students should never talk to the driver while bus is in motion.
7. Students must not fight or scuffle or create any disturbance on the bus.
8. Students must not mark or deface the bus or seats on the bus.
9. Students are not allowed to eat or drink on the bus.
10. Students must remain seated until the bus comes to a complete stop and the driver tells you to move.
11. Students should leave the bus in an orderly manner. Students in the front seats leave first.
12. Students are permitted to leave only at regular designated stops. Any changes must be made in writing by the parent and approved by the Director.
13. If there are any complaints, please call the church. ***DO NOT CALL THE DRIVER AT HOME.***
14. Students will sit in assigned seats.

## Possible Actions Taken For Not Following Rules

- ❖ Student will receive a bus referral.
- ❖ Suspension for a specific number of days
- ❖ Conference with parent, bus driver and SCEP Director
- ❖ Referred to law enforcement.

**1<sup>st</sup> Offense-Student can be suspended from riding the bus until conference with parents and Director.**

**2<sup>nd</sup> Offense-Suspension from bus for \_\_\_\_ days**

**3<sup>rd</sup> Offense- May result in the loss of bus riding privileges for the remainder of the Summer Program.**

\*These guidelines may be adjusted based on the seriousness of the problem.

## **Membership Agreement**

I agree that my child will respect his/herself, the staff and other students.

I understand that the registration fee of \$200.00 is non-refundable. This fee must be paid prior to my child beginning the program unless prior arrangements have been made.

I agree to pick my child up no later than 3:00 PM daily. [Late fees will be added after 3:16 PM] see General Rules for additional information regarding late fees. There will be a \$15.00 fee for the first 15 minutes. After 3:15PM, there will be a \$25.00 late fee for every 15 minutes you are late.

I agree to not bring in food from outside establishments to be served without a doctor's order.

I agree to secure permission from the administrative staff prior to spending time at the camp facility other than as an approved volunteer.

I grant permission for my child to leave the Cherry Hill MBC under the supervision of a staff member for walking and field trips on authorized vehicles.

I understand that I will be financially responsible for replacement of any supplies, equipment, etc., that my child breaks and destroys.

I hold harmless the Cherry Hill Missionary Baptist Church, The Summer Cultural Enrichment Program, its employees, the Pastor, officers, its governing body, the individual members thereof, from and against any and all claims. This indemnifies those persons acting on its behalf for any and all accidents my child might have while the SCEP and further hold them harmless for any actions they might take to provide emergency care for my child.

I have read the membership agreement, procedures, and consequences with my child. I understand that any violations could result in my child (ren) being terminated from the SCEP program and NO REUNDS WILL BE GIVEN.

I have read the bus rules set forth by the SCEP Staff and agree to adhere to them.

As parent or legal guardian of \_\_\_\_\_, I do hereby verify that I fully understand and accept each of the above conditions for permitting my child participate in the Cherry Hill Missionary Baptist Church Summer Cultural Enrichment Program.

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Parent/Guardian

Date

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Student Participant

Date

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CHMBC Summer Cultural Enrichment Staff

Date

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Student Participant Date

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CHMBC Summer Cultural Enrichment Staff Date