

How To Enroll Step-By-Step Guide

We are so excited that you're joining the Champions family! To enroll, please visit www.discoverchampions.com and log into your account. If this is your first time enrolling in a Champions program, you will need to create your account first by clicking on either "My Account" or "Enroll Now" and then "Create Account."

1. From your dashboard, click the "Enroll Now" button.

CHILDREN

You don't have any children currently enrolled. Click Enroll Now to get started.

ENROLL NOW

2. First time enrolling? Enter your child's information under the section "New Champions" and click "Continue." Returning family? Select the boxes next to the children you'd like to enroll and click "Continue". Changing schools? Select the box next to "Child(ren) will enroll at new School."

NEW CHAMPIONS

If your child is new to Champions start here. Enter your child's name and birth date.

If you have multiple children we can enroll them at the same time.

First Child

First Name

Last Name

Date of Birth

MM/DD/YYYY



+ Add Another Child

My kids go to the same school

CONTINUE

CURRENT CHAMPIONS

If your child has previously attended Champions you can use this section to add another program or to enroll in a new school year.

Child	Site
<input checked="" type="checkbox"/> Child One	Liberty School
<input checked="" type="checkbox"/> Child Two	Liberty School

Child(ren) will enroll at new School

CONTINUE

Questions? Family Support at 800-246-2154

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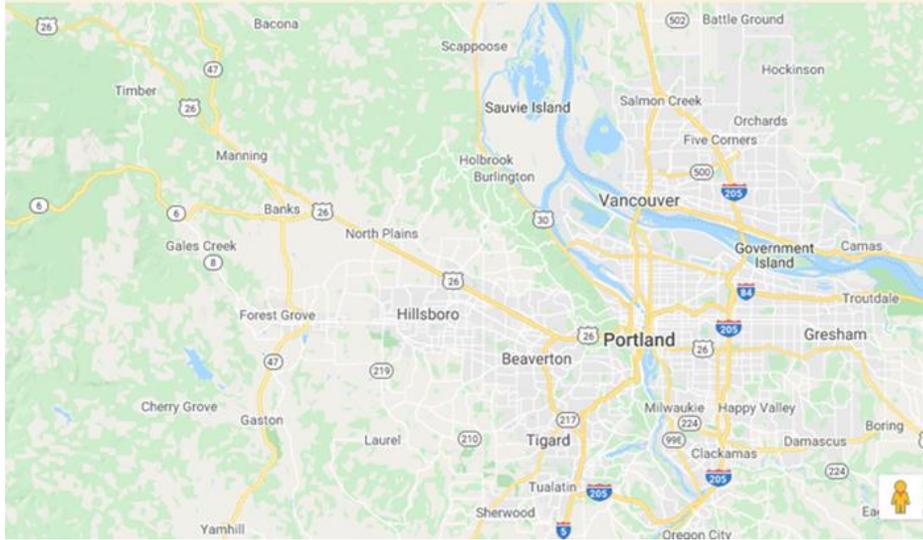
3. Select the program year you'd like from the drop-down menu on the left, then search by zip code or school name to find your location. Click on the name of the school from the options on the bottom or right of the page, and then click "Continue."

LET'S FIND CHILD ONE'S SCHOOL

Select the school/ summer year you want to enroll your child(ren) in and use the search function to locate the site your child(ren) will attend. For existing Champions, the last location your child(ren) attended will populate.

Select School Year
19-20

ZIP or City Or Search by Name
Search Search



When you locate the site you want to enroll at, please click on the site name and continue, to proceed to the next step.

1. SCHOOL NAME

123 School Address
City, State Zip

Programs Offered for 19-20

- Champions
- Champions Fall Break
- Champions Spring Break
- Champions Winter Break

CONTINUE

PROGRAMS AVAILABLE AT SCHOOL NAME

Below are all available programs for the location selected. Select which children you'd like to enroll in each program.

CHAMPIONS

Program designed for children ages 5 to 12 (age range can vary by location). A child may attend before school only, after school only or both (if offered).

Program Dates
08/28/2019 - 06/05/2020

School Year
19-20

Child One

4. Select the programs you'd like for each child.

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5. Set a recurring schedule for each child and click “Continue.” This schedule will auto-populate each week. If your schedule will vary week to week, you can set a blank recurring schedule and then use the custom schedule to add care as needed. If there is a waitlist, you will see a gray box on the day before selecting it. Click the box to be added to the waitlist (it will turn yellow).

CHILD ONE'S SCHEDULE AT SCHOOL NAME

CHAMPIONS		
SESSION After School	PROGRAM DATES 08/28/2019 - 06/05/2020	WEEKLY SCHEDULE Select the days you'd like to schedule. Selecting a 'full' day will add you to the wait list.
TIME Mo - Fr:	PM - PM	<input type="checkbox"/> Su <input checked="" type="checkbox"/> Mo <input type="checkbox"/> Tu <input type="checkbox"/> We <input type="checkbox"/> Th <input type="checkbox"/> Fr <input type="checkbox"/> Sa
		TOTAL PER WEEK: \$
START DATE Select when you'd like to start this program. The earliest available start date is shown.		
<input type="text" value="/ /"/> 		
SESSION Before School	PROGRAM DATES 08/28/2019 - 06/05/2020	WEEKLY SCHEDULE Select the days you'd like to schedule. Selecting a 'full' day will add you to the wait list.
TIME Mo - Fr:	AM - AM	<input type="checkbox"/> Su <input checked="" type="checkbox"/> Mo <input type="checkbox"/> Tu <input type="checkbox"/> We <input type="checkbox"/> Th <input type="checkbox"/> Fr <input type="checkbox"/> Sa
		TOTAL PER WEEK: \$
START DATE Select when you'd like to start this program. The earliest available start date is shown.		
<input type="text" value="/ /"/> 		
Child One's total per week for Champions:		\$

6. You can change your schedule week-to-week as needed, but please note that you must make any changes by the Wednesday prior to the week you're scheduled.

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7. Ensure your child's information is correct and fully filled out.

CHILD ONE'S PERSONAL INFORMATION

Enter your child's personal information.

First Name

Child One

Last Name

Demo

Date of Birth

03/11/2014



Grade

Select Grade



Ethnicity

Select Ethnicity



Gender

Unknown



English Proficient

Special Education Status

Relationship to child



Same as mine

Address Line 1

Address Line 2

City

City

State

--

Zip

Zip

Phone

Phone Number

HEALTH AND CARE INFORMATION

Is there anything we should know about your child's care needs to ensure that we provide the best quality education and care?

My child has allergies

Enter any care instructions or notes here

AUTHORIZATIONS

Check the boxes to authorize your child for various activities.

Transportation

I give permission for my child to participate in and to be transported while under proper staff supervision at all times for field trips, to and from school, educational excursions and other site sponsored activities.

Photographs/Videotape

I give permission for my child to be photographed and videotaped in the site and during program functions and field trips.

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8. Add or confirm at least 3 emergency contacts. You'll need to add a sign in/sign out code for each person. Sign in/sign out codes must be 8-10 alphanumeric digits. We suggest using phone numbers as they fit the requirements and are easily remembered. Enter your contacts' relationships to your child, as well as the order in which you'd like us to call them in case we can't reach you during an emergency.

YOUR SIGN IN/OUT CODE

You need a Sign In/Out Code to pick up/drop off your child at Champions. We recommend using your phone number so it's easy to remember and unique to you in our system. You can change it at any time.

Keep your Sign In/Out code safe and make sure it's something you remember. Sign In/out codes must be between 8 and 10 alphanumeric characters. For security and safety, codes are unique to each person and should not be shared.

Current Sign In/Out Code

This must be a unique code

DEMO'S EMERGENCY CONTACTS

Below are listed your currently available emergency contacts. Select at least 3 and set the relationship to this child.

	Name	Phone	Relationship	Priority	
<input checked="" type="checkbox"/>	Best Person	503-555-1212	Relationship to child	1	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Next Best Person	503-555-1213	Relationship to child	2	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Other Best Person	503-555-1214	Relationship to child	3	<input type="checkbox"/>

Each child must have 3 Emergency Contacts with Priorities 1, 2, 3.

Important

Site staff will only release your child to you or those you list as emergency contacts.

EXIT ENROLLMENT **CREATE NEW EMERGENCY CONTACT** **BACK** **CONTINUE**

CREATE NEW EMERGENCY CONTACT

Their contact information is required. Enter it here.

First Name

Last Name

Phone

Sign In/Out Code

Send Sign In/Out Code to this contact's email address

These fields are optional.

Email

Address

City State Zip

CANCEL **DONE**

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9. Please take a moment to read over the Terms and Conditions, then check the box labeled "I acknowledge my understanding and acceptance of the above terms." Click "Finish Enrollment" and you're all set! If applicable, you will now be invoiced the non-refundable registration fee.

TERMS AND CONDITIONS

MEDICAL ACKNOWLEDGEMENTS

A. **Medication** I will provide written permission for site staff to administer medication with written instructions from me or the child's health care provider, as permitted by local child care licensing regulations. I will complete and sign authorization forms. I will provide the medication in its original container (with the pharmacist's label for prescriptions) prior to administering the medication.

I acknowledge my understanding and acceptance of the above terms.

EXIT ENROLLMENT

FINISH ENROLLMENT

WELCOME

We are excited to meet your family!

Before your child begins the program you will be emailed a welcome packet with detailed information about your Champions programs.

A few reminders prior to your first day:

- Remember to bring your signed enrollment form (you can print it below or at a later time from your dashboard) prior to your first day.
- You can pay your registration fee by returning to your dashboard and clicking the pay now button.

Our Family Support Team is here for you to answer any questions and can be reached at 1-800-246-2154.

We'll see you soon.

Your Champions Team

PRINT

GO TO DASHBOARD

*The earliest possible start date is 2 business days from the time of enrollment. If you need care before then, you can contact our site staff to confirm if there is space. Your child will need to have a completed enrollment and a signed copy of the enrollment agreement before they can attend.

**Scheduling can be changed from week to week, as long as you make any changes by the Wednesday prior to the week you're scheduled—that way we'll only charge tuition for the days you're here!

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