

Stecoah Valley Cultural Arts Center

21st Century Community Learning After School 2018- 2019

Registration Form

Last Name: _____ First: _____ Middle: _____

Male: _____ Female: _____ Birth date: _____/_____/_____

Grade in school for the 2018-2019 school year: _____

Race: American Indian __, Asian __, Black/African American __, Hispanic/Latino __,
White __, Other __

Homeroom teacher's name: _____

Sign my child up for STARS (Theater) (Spring 2019): ___ Yes ___ No

Sign my child up for JAM (Music) (Spring 2019) ___ Yes ___ No

Fiddle ___ Guitar ___ Mandolin ___

INFORMATION ABOUT YOUR FAMILY

Mother /Guardians Name: _____

Home Address: _____ Home phone: _____

Where employed: _____ Business phone: _____

Email address: _____ Cell phone: _____

Father/Guardians Name: _____

Home Address: _____ Home phone: _____

Where employed: _____ Businessphone: _____

Email address: _____ Cell phone: _____

Note: Please be aware if there are court orders for a parent or anyone else not to be around the child, we need to know about these orders.

Please list names and telephone numbers of persons to whom the child can be released:

Please advise these people that the after-school staff has the right to ask for I. D. until we become familiar with everyone.

Please list anyone who is not supposed to be around or pick up your child:

INFORMATION ABOUT YOUR CHILD

Does your child have any known allergies or dietary restrictions? _____

If yes, please provide details:

Is your child currently under a doctor's care? ____ If yes, please explain: _____

Is your child on any continuous medication? _____ If yes, please list: _____

Any history of significant illness or disease? _____ If yes, please list: _____

Does your child have any physical or mental disabilities? _____ If yes, please list:

EMERGENCY CARE INFORMATION

Insurance company: _____ Policy #: _____

Childs Doctor: _____ Office Number: _____

Childs Dentist: _____ Office Number: _____

Hospital Preference: _____

If father, mother or guardian can not be contacted in an emergency, please list other contacts below:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

I agree that after school may authorize the physician of choice to provide emergency care in the event that neither I nor the family physician can be contacted immediately in an emergency. I agree to the transport of my child and the release of important information to authorized medical personnel in the event of an emergency.

Signature of parent/guardian: _____ Date: _____

Printed name of parent/guardian: _____

Emergency contact numbers:

Mother: _____

Father: _____

Others: _____

Release of liability: I agree to release the Stecoah Valley Center system from all liability in case of accident or injury during after school. I agree to indemnify and hold harmless the Stecoah Valley Center, staff, and Board of Directors of any and all claims, demands, or causes of action that are brought by myself, my child, or on behalf of my child against the

Stecoah Valley Center. I certify that I have adequate insurance to cover injury or damage that my child may suffer while participating in after school or else I agree to bear the costs of such injury or damage myself, including ambulance transportation expenses.

Signature of parent/guardian: _____ Date: _____

AUTHORIZATION STATEMENTS

Policy and procedure statement: I have received and read the Stecoah Valley Center Afterschool Program Student/Parent Handbook, and I agree to abide by the policies and procedures as stated.

Signature of parent/guardian: _____ Date: _____

Permission to be photographed and/or videotaped: My child has permission to be photographed and/or videotaped during after school activities. I understand that my child's photo and/or video image may be used in media articles, presentation materials, camp materials or on social media.

Signature of parent/guardian: _____ Date: _____

Permission to release of educational records I agree to share on a need to know basis my child's educational records, including report cards, to assist in the delivery of services in the evaluation of the 21st CCLC After School Program.

Signature of parent/guardian _____ Date _____

Stecoah Valley Center Afterschool Program
Student/Parent Handbook
2018-2019

Hours of Operation

The Stecoah Valley Center Afterschool Program will operate *Monday through Friday from 3:30 p.m. to 6:00 p.m.* The afterschool program will operate when school is in regular session. There will be no afterschool program on workdays, holidays, early dismissal days, or snow days.

Late Pick Up

Students must be picked up by 6:00 each afternoon. The first late pick-up will result in a warning. After the second late pick-up, students will be dismissed from the program for the remainder of the nine weeks. Please be respectful of our staff and plan to pick up your child on time each day.

Attendance

It is important for your child to regularly attend the Stecoah Valley Center Afterschool Program. All activities and programs are designed to help students be successful in school. In order to get full benefit of the afterschool program, students should attend every day.

Parent Participation

Successful student achievement is dependent on the involvement of parents and guardians. Stecoah Valley Center Afterschool staff will be intentional about communicating with parents about their child's progress in the afterschool program. Throughout the year, programs will be offered to parents. Parents are strongly encouraged to participate in these activities and to support their child's participation in the afterschool program.

Behavior Management/Discipline Policies

It is the goal of the Stecoah Valley Center Afterschool Program to provide students with a safe and positive afterschool environment. Our center is set up to avoid conflict among students as we operate in small groups and minimize the transition times between activities by providing sufficient age appropriate toys and materials. Additionally, children are supervised at all times so staff may mediate if disruptive behavior occurs. **Corporal punishment will NOT be used during the Stecoah Valley Center Afterschool Program.**

All students are expected to behave in a respectful and orderly manner while at the afterschool program. If, however, a student becomes disruptive, our staff will use the following types of non-physical discipline:

- 1) **Re-direction**-Students will first be offered appropriate alternatives to disruptive or un-acceptable behaviors.
- 2) **Time Out**-If step one does not work, the child will be placed in time out. Time out will involve removing the child from his/her current situation to allow time to regain control of behavior. The amount of time out given will be age appropriate. As a general rule, students will be placed in time out based on age. For example, a five year old may sit out for five minutes, a seven year old for seven minutes, etc.
- 3) **Parent Contact/Warning**-If the first two steps do not improve the child's behavior, the Afterschool Site Director will contact the child's parents. The first parent contact will serve as a warning.
- 4) **Second Parent Contact/One-week suspension**-The student will receive one week's suspension if parents must be contacted a second time regarding their child's behavior.
- 5) **Third Parent Contact/Suspension for remainder of program**-The students will be suspended for the remainder of the school year if the parents must be contacted a third time regarding their child's behavior.

Medication

The Division of Child Development regulates medical care for their childcare facilities. The Stecoah Valley Center Afterschool Program staff will not give medication to any child. Please do not send your child to school with a note and medicine. No child at this childcare center may be in possession of his/her own medicine. This includes over the counter drugs such as cough drops, aspirin, Neosporin, etc. Please contact the Afterschool Site Director if you have any questions or concerns.

Please take time to review this information with your child. The attached Student/Parent Receipt Form must be signed and returned in order for your child to attend the Stecoah Valley Center Afterschool Program. Thank you for your cooperation.

Stecoah Valley Center Afterschool Program
Student/Parent Handbook
2018-2019

I, _____ have received and reviewed the Stecoah Valley Center Afterschool Program Student/Parent Handbook with my child:

_____.

Parent Printed Name

Parent Signature

Date

Student Printed Name

Student Signature

Date