

Winston-Salem Recreation & Parks Elementary After School Program

2019 – 2020 Academic Year
Registration Form

Participant Information

Name: _____ Age: _____ Birthday: _____

School: _____ Teacher: _____ Grade: _____

Parent(s) Name(s): _____

Address: _____

City: _____ Zip: _____

Telephone #: Home _____ Work _____ Other _____

Email: _____

Emergency Contact

Name: _____ Relationship: _____

Address: _____ Phone #: _____

Permission for Pick-Up (Must be older than 16)

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Will your child self-check out (additional form is required)? YES NO

Early Release

Will your child attend on Early Release Days (10/9, 12/11, 2/19, 3/18)? YES NO

Will your child attend inclement weather early release? YES NO

Please provide any additional information (Medical conditions, medications, allergies, special needs, etc):

Waiver of Liability

I give permission for my child to participate in Winston-Salem Recreation & Park's After School Program, a program organized by the Recreation & Parks Department of the City of Winston-Salem (hereinafter, the "City"). In consideration of the City's organization of this program, I agree to hold the City, its employees, agents, and volunteers, harmless from and against any and all claims, liabilities, demands, damages, actions or causes of action, of any kind or character (including, without limitation, attorney's fees, costs, and expenses) that may arise in any manner by reason of injury or damage to my child's person (including illness or death), property or both as a result of his/her participation in the City's After School Program. I understand that during my child's participation in the City's After School Program (s)he is subject to the rules and regulations of the Recreation & Parks Department. I further understand and agree that this Waiver of Liability is binding upon my executors, administrators, personal representatives, collectors, heirs, successors, and assigns.

Parent/Guardian (Print) _____ Date _____

Parent/Guardian Signature _____

Winston-Salem Recreation & Parks After School Program

2019 – 2020 Academic Year
Policies

Fees

- After School fees are \$15/week or \$60/month
 - Fees are due submitted every Monday
 - Late payments will incur a \$5 late fee after Wednesday
 - Delinquents payments (2 weeks) will result in suspension from program
 - Children are not eligible for participation in other programs until fees are paid
- A deposit of \$30 per child is required for registration
 - Deposits are NON-REFUNDABLE
- Weekly payments are required to maintain participation regardless of number of days attended.

Child Pick-up

- Only parents, guardians, and individuals listed for pick-up are allowed to remove children from facility
 - Parents/guardians are required to contact employees in regards to pick-up changes in writing
 - Anyone not on the Pick-Up List will be confirmed by identification and contact with parents
- Parents/Guardians MUST sign children out of facility
 - Children will not be allowed to leave the building unattended
- Parents/Guardians requesting participants to leave the facility unescorted are required to complete a permission form.
- **LATE PICK-UP:** There is a \$5 per 15 minute late fee for children picked up after **5:30 pm**
 - Parents should contact recreation center if they know they are going to be late

Notice of Leave

- Parents are REQUIRED to notify recreation center if child will not attend (sick, vacation, etc.)
 - Repetitive failure to contact the facility may result in termination of participation
- A written letter (digital or hard copy) must be submitted to the program supervisor if your child will no longer participate

Parent/ Guardian (Print) _____ Date _____

Parent/ Guardian Signature _____

Winston-Salem Recreation & Parks After School Program

2019 – 2020 Academic Year
Code of Conduct & Discipline Policy

Code of Conduct

To make Winston-Salem Recreation & Park's (WSRP) After School Program a fun experience for your child and other camp participants, it is important that the following behaviors are understood by parents and participants as prohibited and can be grounds for suspension and/or expulsion:

- Disruption of homework
- Fighting, instigating a fight, harming another participant, staff, or volunteers
- Defiance of staff, volunteers, or other supervisors
- Stealing
- Harassment (verbal or physical)
- Destruction of property
- Inappropriate attire (shoes with wheels, halter tops, etc.)
- Leaving facility
- Bullying

Discipline Policy

Disobeying the Code of Conduct above can result in WSRP staff disciplining the participant with timeout or restricting group participation. Each offense of the Code of Conduct policy will result in the following:

- 1st Offense – Verbal warning to child & inform parent
- 2nd Offense – Letter of behavior to parents
- 3rd Offense – Letter of behavior to parents & conference
- 4th Offense – Suspension (1 day)
- 5th Offense – Expulsion from all WSRP After-School Programs

WSRP reserves the right to omit discipline steps depending on the severity of the offense. These offenses will be documented and will carry through the entire school year. If your child is suspended or expelled NO REFUND will be granted.

If participants intentionally destroy or damage any WSRP equipment (pool sticks, balls, paddles, etc.) items are expected to be replaced or paid for parents/guardians.

Parent/Guardian Signature

Date

After School Participant Signature

Date

Winston-Salem Recreation & Parks After School Program

2019 – 2020 Academic Year
General Information

Recreation Centers will be closed on:

Labor Day	Monday, September 2
Veteran's Day	Monday, November 11
Thanksgiving	Thursday, November 28 & Friday, November 29
Christmas	Wednesday, December 25
New Year's Day	Wednesday, January 1
MLK Day	Monday, January 20
Good Friday	Friday, April 10
Memorial Day	Monday, May 25

Holidays and Breaks

After School Program will correspond with in-session school dates, teacher work days, and holiday breaks. For holiday breaks some recreation centers offers the following activities (REGISTRATION REQUIRED):

WePLAY Days: 7:30 am – 5:30 pm, \$10/day early registration, \$15/day of event

Monday, October 28
Tuesday, October 29
Wednesday, November 27
Thursday, January 23
Friday, January 24
Monday, March 30

Winter Camp: 7:30 am – 5:30 pm, \$50/week early registration, \$60/week after December 6

Monday, December 23 – Friday, December 27 (CLOSED December 25)
Monday, December 30 – Friday, January 1 (CLOSED January 1)

Spring Break Camp: 7:30 am – 5:30 pm, \$50/week early registration, \$60/week after March 28

Monday, April 13 – Friday, April 17

Inclement Weather Days

WSRP will offer day camp activities when WS/FC Schools are closed for inclement weather at specific locations. Facility will open at 8 am (or when staff are able to safely arrive) until 5:30 pm for snow days. \$10/child. Check with recreation center staff regarding inclement weather sites.

What to bring each day:

- Snack or money for snacks (Drink machine \$1.00/ Vending Machine \$0.50 - \$1.00)
 - Candy and soda are not permitted for purchase EXCEPT on Fridays
- Homework assignments and study materials
- Books or other reading material for when homework is completed

What NOT to bring:

- Electronics (MP3 players, phones, etc. unless on designated days)
- Valuables
- Food to share/trade (food allergies)

Winston-Salem Recreation & Parks After School Program

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Medication Form

Participant Information

Name: _____ Age: _____ Birthday: _____

Address: _____

City: _____ Zip: _____

Phone #: _____ Email: _____

I understand that the Winston-Salem Recreation & Park's Department discourages the administration of medications at WSRP After School Program unless it is necessary for the health of the participant. No medication will be administered to a child without the written order of a licensed physician or dentist and permission of the parent/guardian. **Medication must be clearly labeled with child's name, dosage amount, and in original container.** No injections will be given except in extreme emergency (allergy to wasp, bee, etc.)

**Parents/Guardians are strongly encouraged to
administer medications at home before or after WSRP After School Program.**

Parent/ Guardian (Print) _____ Date _____

Parent/ Guardian Signature _____

COMPLETED BY PHYSICIAN:

Child's Name: _____ Date of Birth: _____

Medication: _____ Begin/End Date: _____

Medication type: Tablet Capsule Liquid Ointment Inhalant Other: _____

Dosage: _____ Time of Day: _____ Frequency: _____

Precautions/Side Effects/Comments: _____

Physician Signature: _____ Date: _____

Phone Number: _____