Kids' Blast is for students in grades K-6 that are enrolled in Portland Public Schools or residents of Portland.

Only people listed on this application will be allowed to pick your child from Kids' Blast. Identification is required at pick up.

Children from Valley View and Gildersleeve will be bused to Brownstone Intermediate School where Kids' Blast staff members will be waiting outside for them to get off the bus. Students who attend Brownstone Intermediate School will be dismissed with the students who walk home, and they will walk to the Kids' Blast area of the school where Kids' Blast staff will be waiting for them. It is your responsibility to communicate alternate bus route and dismissal schedules with Portland Public Schools.

If you are sumbitting a paper registration, then please make sure to include the \$20 Kids' Blast application fee with your paperwork.

Child's Name (First and Last)	_					
(Required):					· · · · ·	
Child's Age (Required):						
Child's Date of Birth (Required):						
Child's Gender (Required):						
(1.044.1.04).						
Parent/Guardian #1's Name						
(Required):						
Parent/Guardian #1's Cell Phone		()	-		
(Required):						
Parent/Guardian #1's Work	()	-			
Phone:						
Parent/Guardian #2's Name:						
	,					
Parent Guardian #2's Cell Phone:	())	-			
Parent/Guardian #2's Work	()	-			

Family's Address (Required): Street: -----Address Line 2: City, State, Zip: Parent/Guardian #1's Email (Required): Parent/Guardian #2's Email: School the child is attending for the 2023-2024 School Year (Required): (Select only one option) ☐ Valley View Gildersleeve ☐ Brownstone Intermediate School Child's grade for the 2023-2024 School Year (Required): (Select only one option) ☐ First Grade ☐ Kindergarten ☐ Second Grade ☐ Third Grade ☐ Fourth Grade ☐ Fifth Grade ☐ Sixth Grade Does the child have any special medical needs or allergies? (Required): (Select only one option) If you selected "Yes," then please send an email to adionne@portlandct.org or cbrennan@portlandct.org so we can discuss your child's special medical needs. ☐ Yes ПΝο

Emergency Contact Information

In the event of an emergency, the phone numbers listed for Parent/Guardian #1 and Parent/Guardian #2 will be contacted first.

If Kids' Blast staff cannot reach either Parent/Guardian #1 or Parent/Guardian #2, then they will call the child's Emergency Contacts.

Anyone noted as an Emergency Contact will be included on the approved pick-up list unless otherwise specified.

Emergency (Required):	Contact #1's Name						
Emergency (Required):	Contact #1's Relation	nship to Ch	nild	-			
Emergency (Required):	Contact #1's Phone		()	-		
Emergency Name:	Contact #2's						
Emergency Child:	Contact #2's Relation	nship to					
Emergency Phone:	Contact #2's	()	-				

Approved Pick-Up List

Please list anyone who is allowed to pick up your child from the Kids' Blast Program.

Individuals listed as Parents/Guardians or Emergency Contacts are automatically included on the Approved Pick-Up List unless otherwise specified.

Please be aware that Parent/Guardians, Emergency Contacts, and anyone listed below will all be required to present the Kids' Blast staff with a valid photo ID in order to pick up your child.

Approved Pick-Up Person #1's Name:	
Approved Pick-Up Person #1's Relatio Child:	enship to
Approved Pick-Up Person #1's Phone:	() -
Approved Pick-Up Person #2's Name:	
Approved Pick-Up Person #2's Relatio Child:	enship to
Approved Pick-Up Person #2's Phone:	() -
Please list the name and phone number from Kids' Blast:	er of anyone else who is approved to pick up your child

Please list anyone who does not have permission to pick up your child. If this is a biological parent, then a copy of the court order must accompany this form:

Medical Consent and Release of Liability

Please read carefully and sign the MEDICAL CONSENT AND RELEASE OF LIABILITY below to complete the registration.

I understand and agree that Portland Parks & Recreation provides this program. (I) (we) do hereby release, discharge indemnify and hold harmless, the Portland Parks & Recreation Department, the Town of Portland and the Portland School System, their employees, servants or agents and assigns from and against, and waive any and all claims or liabilities for, any injuries, losses or damages including without limitation, injuries to my child, myself, and or property arising out of incident to my child while attending this program, whether caused in whole or /part ,by negligent act(s) or omissions(s) of the Portland Parks & Recreation Department, the Town of Portland, and the Portland School System, or the employees, servants, agents and assigns. In the event of a medical emergency I do know that every effort will be made to contact me. I give my permission to Portland Parks & Recreation staff and or responding Emergency Medical Personnel to treat my child on scene and transport via ambulance or other appropriate means if deemed necessary. I acknowledge that my child is in good health and has my permission to participate in this program and on possible field trips. I understand that various activities present a risk, including but not limited to playscape activities. I have read this form and voluntarily accept its terms.

Child's Name (Required):	
Parent/Guardian's Name (Required):	
Parent/Guardian's Signature (Required):	
Date of Signature (Required):	

Kids' Blast Parent/Guardian Responsibilities

In registering your child in the Parks and Recreation Kids' Blast program, you agree to and understand the following Parent/Guardian responsibilities:

- 1.) I understand that Registration for the Kids' Blast After School Program is done on a month to month basis. Before I register for a month of Kids' Blast, I must first purchase a Kids' Blast 2023-2024 membership for \$20 and complete all the necessary paperwork.
- 2.) I understand that The cost to attend Kids' Blast is \$20 a day. During the registration process, I will select which days of the week my child will be attending the program. The total cost of my monthly registration is determined by the amount of school days scheduled on the Portland Public Schools 2023-2024 Calendar. I also understand that fees will be paid for days registered regardless of attendance. If Portland Public Schools are closed for any reason (i.e. Snow Days), then Kids' Blast will also be closed. I will receive a Household Credit of \$20 for each canceled day of Kids' Blast that I already paid for. This Household Credit does not expire, and it can be used for any future Parks and Recreation program registration or facility rental.
- 3.) I understand that registration and payment for a month of Kids' Blast must be completed by the 15th of the month prior. For example, if I would like to register for Kids' Blast for the month of October, then registration must be finalized and payment must be submitted by September 15th. I understand that I may be charged a \$20 late fee if payment is received after the 15th. I also understand that my child will be removed from the Kids' Blast program after 45 days of non-payment.
- 4.) I understand that it is my responsibility to contact the Kids' Blast program if my child will be absent prior to their expected arrival time at the program. The direct line for Kids' Blast is 860-262-7228. Failure to notify Kids' Blast staff members of my child's absences will jeopardize my child's further participation in the program.
- 5.) I understand that I must sign my child out of the Kids' Blast program no later than 6:00pm. Furthermore, I understand that late pickup fees will be charged. I will be charged \$10 for my first late pickup and \$20 for my second late pickup. After my third late pickup, my child will no longer be registered in the Kids' Blast program.
- 6.) I understand and agree that it is my responsibility to meet with and address with program staff (or Recreation Coordinator or Parks and Recreation Director) any concerns I may have regarding my child's behavior, health or safety.
- 7.) I give Portland Parks and Recreation permission to take photos or videos of my child to be used as displays or program promotions.
- 8.) By signing below, I agree that I have read this form and voluntarily accept its terms.

Parent/Guardian's Name		
(Required):		
Doront/Cuardian's Signature		
Parent/Guardian's Signature		
(Required):		
Date of Signature		
(Required):		