

Portland Parks & Recreation Kids' Blast Program 2021-22

Registration Information (Keep Page 1 & 2 for your records)

- 1) Must be enrolled in Portland Schools or be a resident of Portland in Grade K to 6 or other student approved by Recreation Coordinator.
- 2) Must have updated physical sheet signed by M.D. as accepted by Portland Schools
- 3) Registration form must be completed and returned to the <u>Portland Parks & Recreation</u> office at 265 Main St. or mailed to P.O. Box 71, Portland, CT. 06480. All Applications are processed on a first come first served basis.
- 4) Non-refundable Registration fee of \$20.00 must accompany application. Fee for 1st month of program must be received no later than August 15, 2021.

 Payments are due by the 15th of the month; a \$20.00 late fee may be added after the 15th. If a personal check is returned due to a lack of funds, the parent/guardian must pay a \$25.00 returned check fee. If a check is returned more than one time, only cash or money orders will be accepted as payment.
- 5) Registration is on a set weekly basis. No change of schedule is allowed without Director's approval with at least 2 weeks notice and in writing.
- 6) Only people listed on application will be allowed to pick up children, identification will be required.
- 7) Court order must be provided for people that are listed as not being allowed to pick up children registered in the program.
- 8) Alternate bus route form must be filled out by July 1, 2021 and returned to your child's school office.

***If Financial Assistance is needed you must fill out a Town of Portland's Youth Services/Park & Recreation Financial Assistance Application. Forms are available from Parks & Recreation or on line at www.portlandct.org. in the Parks & Recreation Department area. If a family is applying for Financial Assistance from the Town, the appropriate application must be submitted and approved with a signed agreement 30 days prior to child/children attending the Kids Blast Program.

- II. Program Fees are calculated as per day fees based on the school calendar and billed accordingly.
- III. Checks are to be made out to Portland Parks & Recreation.

Session	5 Day Participant	Sibling	1 to 4 Day Participant	Sibling
After School Care (end of school day approx. 3:00 to 6:00	\$18.00/per day	\$17.50/per day	\$19.00/per day	\$18.50/per day

PARENTS, PLEASE KEEP THIS PAGE FOR YOUR RECORDS

IV. PROGRAM SCHEDULE

- 1) Will follow Portland School calendar
- 2) Will not be open on Board of Education approved Holidays or vacations.
- 3) Program ends on the last day of school

V. LATE OPENING / SNOW DAY POLICY

1) Early School Dismissal Policy

- **a)** On days on school calendar listed as early closing, holiday etc. Students arrive at school dismissal time and will be picked up at their normal departure time which is before 6:00 p.m.
- b) On days of early dismissal due to heat or inclement weather students arrive at program and need to be picked up **no later then 3:00 p.m.**
- c) On days of early dismissal due to inclement weather that the state and town close their buildings., parents will be notified and must pick their children up **immediately within one hour from program.**

2) Snow Days

NO PROGRAM ON SNOW DAYS

VI. DAILY PROGRAM STRUCTURE

- 1) Attendance taken
- 2) Free time till all arrive
- 3) Wash Hands
- 4) Snack Time
- 5) After School Program Homework and or Reading time for all
- 6) Followed by various activities/crafts/organized games as well as outside play time weather permitting upon completion of homework. Special activities are planned throughout the week.

NOTE: KEEP THIS PAGE FOR YOUR RECORDS

KIDS' BLAST DIRECT PHONE (860)262-7228

PORTLAND,CONN.

Town of Portland, Connecticut

265 Main Street • P.O. Box 71 • Portland, CT 06480-0071 Phone: (860) 342-6757 • Fax: (860) 342-6763 • Hotline (860) 262-7234

www.portlandct.org
Equal Opportunity Provider and Employer

Office of Parks and Recreation

Kids' Blast Program 2021-22 Application

I am enrolling my child in the Town of Portland's Parks & Recreation Kids Blast program located at Brownstone School on the following days:

After School: Monday	Гuesday V	Wednesday	_ Thursday	_ Friday
Youth's Name	Age_	Date	of Birth	Gender
Parent/Guardian Name		Parent/Guard	ian Name	
WORK PHONE		WORK PHO	NE	
CELL PHONE		CELL PHON	NE	
E-MAIL ADDRESS:				_
ADDRESS		HOME	TEL.#	
SCHOOL ATTENDING IN	SEPT 2021		GRA	ADE
ARE THERE ANY SPECIAL	L MEDICAL N	NEEDS? YE		NO
IF YES , THEN PLEASE EX AND ATTACH.	PLAIN ON S	EPARATE SH	HEET. PLEAS	SE DATE, SIGN,
NAME OF FAMILY'S INSUI	RANCE CO.	& POLICY#		
NAME OF CHILD'S/YOUTH PHYSICIAN		T	EL.#	
Emergency Contact Inform Anyone noted as an emergency of otherwise specified.		included on the	approved pick-ı	up list unless
Name		Phon	e	
Name		Phon	e	

Please list anyone who is allowed to pick up your child from the Kids' Blast Program:
Please be aware that anyone listed above will be required to present the staff with a valid photo ID in order to pick up your child.
Please list anyone who <u>does not</u> have permission to pick up your child (If this is a biological parent, a copy of the court order must accompany this form.)

Medical Information/Special Needs

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, 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, 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 N	ame(please print name)		
Signature _.	(Parent or Guardian)	(Please print name)	
Date		_	

Finally, in registering your child in the Parks & Recreation Kids' Blast program you agree to and understand the following parent/ guardian responsibilities.

- 1. To pay the day/monthly fees by the 15th of the Month. I understand fees will be paid for days registered regardless of attendance. I also understand that if payment is received after the 15th I may be charged a \$20.00 late fee. After 45 days of non- payment your child will be removed from the program. (Any credit to the program due to snow days etc. will be finalized on the May 1, 2022 invoice.)
- 2. To notify by calling <u>Kids' Blast directly at (860)262-7228</u> that your child will be absent prior to their expected arrival time at the program. <u>Please place this number in your Cell Phone contact list</u>. There is an answering machine at the <u>Kids' Blast program location</u>. <u>Failure to do so will jeopardize your child's further participation in the program</u>
- 3. To sign your child out of the afterschool program by no later then 6:00 p.m.
- 4. <u>Late pickup fees will be charged, \$10.00 will be charged for 1st offense, \$20.00 2nd offense, 3rd offense and child will no longer be registered in the program.</u>
- 5. To meet with and address with program staff (and or Recreation Coordinator or Parks & Recreation Director) any concerns they may have regarding your child's behavior, health or safety.
- 6. To allow Portland Parks & Recreation to take photos or videos to be used as displays or program promotions.

I agree that I have read this form and voluntarily accept its terms				
(Parent or Guardian) Signature	Please print name			
Date:				