



IMPACT AFTERSCHOOL PROGRAM

Norwalk Parks & Recreation Department

Wednesdays: January 9th- March 13th, 2019

Hours: 3:15 - 5:30 PM

Please complete the following information (print legibly)

Child's Name: _____ Gender: Male Female

Grade: _____ Students D.O.B.: _____ Students Age: _____

Student's School: _____ Email: _____

Name of Parent(s)/ Guardian(s): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ Work #: _____

Cell Number: Parent/Guardian #1: _____

Parent/Guardian #2: _____

***Please notify the Recreation Director, Niki Cross ASAP if any of the above information changes via email or phone; ncross@norwalkoh.com or (419) 663-6775 ext. 1026**

EMERGENCY CONTACT INFORMATION

**List two emergency contacts other than those listed above:*

Contact #1: _____ Relationship: _____

Home/Cell #: _____ Work #: _____

Contact #2: _____ Relationship _____

Home/Cell #: _____ Work #: _____

MEDICAL CONCERNS/ALLERGIES:

***THERE IS NO CHARGE FOR THE PROGRAM, BUT WE CAN ONLY ACCEPT 40 STUDENTS ON ANY ONE DAY DUE TO LEADER/STUDENT RATIOS AND FUNDING.**

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***All students MUST COMPLETE A REGISTRATION FORM before being permitted to attend the IMPACT After School Program. Completed forms can be turned in at the Ernsthausen Community Center, Main Street School office or brought to the program on their first day.**

Program Details:

- **The program runs on Wednesdays, January 9th-March 13th, 2019**
- **Program begins at 3:15pm in the Main Street School cafeteria and runs until 5:30pm.**
- **The program is a collaboration between Norwalk Parks & Recreation, OSU Extension- SNAP-ED Program, Fisher-Titus Medical Center, and the Norwalk City School District.**
- **The curriculum used includes material from the evidence-based Overcoming Obstacles Life Skills Program (Substance Abuse Prevention & Social Skills), CATCH Kids Club (Coordinated Approach to Child Health, focusing on nutrition education and physical activity), and the SNAP-ED program.**
- **The Program is FREE, but we can only accept 40 students max into the program on any one day.**
- **There is NO SET REGISTRATION PERIOD, students are permitted to start the program any time during the session period (January 9th- March 13th, 2019).**

Schedule:

- **3:00-3:15pm** **Students arrive and check-in**
 - **3:15pm-3:35pm** **Overcoming Obstacles Activity & Discussion**
 - **3:35pm-4:15pm** **SNAP-Ed: SNACK TIME**
 - **4:15pm-5:00pm** **Physical Activity(CATCH) through games & activities**
 - **5:00pm-5:30pm** **Journal Time**
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- **A maximum of 40 children will be allowed in the program per 10-week session, on a First Come, First Serve basis, based on state guidelines of chaperone to student ratios, and funding provided.**
 - **The program will be canceled on ANY day that the Norwalk City School District is not in session, including weather related cancelations.**
 - **A snack will be available for each child, provided by the SNAP-ED program, OSU Extension and the Norwalk City School District.**



EMERGENCY MEDICAL RELEASE & HOLD HARMLESS RELEASE

If emergency medical care is necessary and I cannot be reached, I authorize the Norwalk Parks & Recreation staff to act on my behalf in granting permission for my child to receive emergency medical treatment. I understand that I am responsible for all expenses incurred as the result of any medical treatment.

I hereby waive, release, absolve, indemnify, and agree to hold harmless the Norwalk City School District, City of Norwalk, Norwalk Parks & Recreation, and any other organizing party, it’s directors, officers, organizers, sponsors, supervisory staff, participants, and any other affiliates; for, from, and against any liability because of any bodily injury, or property damage, known or unknown, which may occur or result from the participation of the above named child in any and all activities whether the result of negligence or for any other cause of the Norwalk City School District, City of Norwalk, or Norwalk Parks & Recreation Department. I individually, and as a parent/guardian for my child, have read this release and understand all the terms. I execute it voluntarily and with full knowledge of its significance.

Release made this _____ of _____, 20____ by _____
Day Month Parent/Guardian Signature

AUTHORIZATION TO PRODUCE AND USE AUDIOVISUAL MATERIALS

I hereby voluntarily and without compensation authorize the Norwalk Parks & Recreation Department to produce photographs, movies, videotapes, audio-tapes, and Power Point presentations of the below named student. This authorization is given on the condition that the materials taken or produced will be used for the purpose of community education or program promotion. I understand that the Norwalk Parks & Recreation Department and its employees will not use these materials for compensation.

I understand that this grant of permission shall only be revoked by a written instrument delivered to the Recreation Director of the Norwalk Parks & Recreation Department. This consent shall remain in effect, unless revoked.

Name of Student Name of Parent/Legal Guardian (please print)

Date Signature of Parent/Legal Guardian

Expectations:

- Please remember that the IMPACT After-School Program is not a babysitting service. Children are expected to interact with other children. Children are required to participate in all activities as instructed by the NPR Impact staff, unless limitations are noted in the “Medical Problems” section of this form.
- Failure to follow the rules can result in your child being expelled from the Program.
- Disrespect of the NPR Impact staff, refusal to follow instructions, fighting, bullying of any type, are grounds for immediate dismissal.



STUDENT CODE OF CONDUCT

- *Respect yourself and the IMPACT staff*
- *Play fairly and be honest*
- *Applaud the efforts of others*
- *Avoid inappropriate language*
- *Eat and drink in designated areas*
- *Say only good things about and to others*
- *Follow the instructions of the IMPACT staff*
- *Resolve disagreements in a positive way*
- *Running allowed in gym or outside field areas ONLY*
- *Listen during appropriate times and assemblies*
- *Be respectful of other members and their property*
- *Tobacco, drugs, alcohol, and weapons are prohibited*
- *Take care of the facility, grounds, and equipment. If you make a mess, you clean it up*

Bullying/harassment/fighting has no place at IMPACT.

Violation of this policy includes:

- Physical assaults (touching in an aggressive way)
- Threats
- Harassment
- Name-Calling
- Racial Slurs
- Intimidation
- Sexual Harassment- physical or verbal
- Spreading Rumors
- Extortion
- Foul Language
- Taunting
- Making insulting remarks about another student's family members
- Using the internet to harass, threaten, verbally abuse, intimidate, or spread rumors

Violation of the intent of this policy by a participant of the IMPACT After School Program will not be tolerated. Review of the policy serves as your WARNING.

- **First Offense:** suspension for up to 2 weeks
- **Second Offense:** suspended for the remainder of the program.

The enforcement of this policy and any judgement on the punishment of a student for violation of this policy will be the decision of the NPR staff and is not subject to a hearing or appeal.

Student's Signature

Date

Parent/Guardian Signature

Date

TRANSPORTATION INFORMATION

If I arrive later than the dismissal time or am unable to pick up my child after the After-School Program, my child has my permission to follow the procedure marked below:

- I give my child permission to walk home or use public transportation unsupervised to return home.
- I DO NOT give my child permission to walk home or use public transportation, I or a person listed on my "Authorized" list will be picking my child up from the Main Street School cafeteria at the dismissal time of 5:30pm.

CHECK OUT AUTHORIZATION

Student's Name: _____

The following individuals are authorized to check-out the above-named student from the IMPACT After School Program.

- 1. Name: _____ Relationship: _____
- 2. Name: _____ Relationship: _____
- 3. Name: _____ Relationship: _____
- 4. Name: _____ Relationship: _____

*The above-named individuals will need to provide identification for verification of person when picking their student up.

Parent/Guardian Signature: _____ Date: _____

