

Date: _____

Afterschool Site: _____

ASHEVILLE PARKS and RECREATION
2018-19 YOUTH AND TEEN PROGRAM APPLICATION

Name of Child: _____
Last First MI Nickname

Address: _____
Street City State Zip Code

Birth Date: _____ Age: _____ Sex: _____

School Attending: _____ Grade: _____ Teacher: _____

INFORMATION ABOUT THE FAMILY:

Parent's Name*: _____ **Relationship:** _____ **Home Phone:** _____

Address: _____

Employer: _____ **Hours:** _____ **Work Phone:** _____

Parent's Name: _____ **Relationship:** _____ **Home Phone:** _____

Address: _____

Employer: _____ **Hours:** _____ **Work Phone:** _____

*(*If child not living in parent's home, name of legal guardian)*

Are there any court-authorized restrictions related to custody or visitation? If yes, please describe & supply documentation.: _____

EMERGENCY CARE INFORMATION:

I hereby give permission to Asheville Parks and Recreation to secure emergency medical, dental, and/or emergency surgical treatment, and to provide emergency transportation for the above named minor child while in care. Non-emergency medical treatment or elective surgery is not included in this authorization.

Signature: _____ **Date:** _____

INFORMATION ABOUT YOUR CHILD - Physical Health

Does your child have any allergies and/or diet restrictions? If yes, please specify _____

Is your child taking medication regularly? _____ If yes, please specify _____

Does your child have any chronic illness or health problem? (i.e. asthma, frequent earaches, etc.)

COMMUNICATION AND APPROVED ADULT CONTACTS:

In an attempt to foster more effective communication please indicate if we can email or text you.

Email: Yes No Email _____

Text: Yes No Phone Number _____

If the site staff is not able to reach either parent or guardian, who should be contacted?

Name: _____ Relationship: _____ Phone:(H) _____ Phone:(W) _____

Name: _____ Relationship: _____ Phone:(H) _____ Phone:(W) _____

***Prior arrangements must be made when an unauthorized person will be picking up your child. Call the facility staff to make these arrangements. Picture ID will be checked on all unfamiliar persons.**

FIELD TRIPS & ACTIVITIES OUTSIDE THE SITE GROUNDS:

I hereby give permission to Asheville Parks and Recreation Afterschool & Teen Program, for my child to do each of the following:

- **Participate in a walking trip or to be transported in a vehicle for a field trip.**
- **Participate in developmentally appropriate, supervised activities outside of fenced playground or play area.**
- **Secure emergency medical, dental, and/or emergency surgical treatment, and to provide emergency transportation for the above named minor child while in care.**
- **Non-emergency medical treatment or elective surgery is not included in this authorization.**

Signature: _____ Date: _____

Discipline and Behavior Management Policy

Asheville Parks and Recreation youth programs are based on recreational activities provided in large group settings, with transitions from one program area to another. In order to insure the care, welfare, safety, and security of all youth program participants, children are expected to follow the following basic rules:

CARE & RESPECT FOR SELF, OTHERS, & THINGS...

1. Keep hands, feet, and objects to yourself.
2. Treat other children, staff, and visitors with respect.
3. Follow the instructions of your group leaders.
4. Always stay with your group.
5. Be kind to the environment & play spaces.

Please review these rules with your children. Staff will use praise & positive teaching techniques to encourage appropriate behavior, and all programs will practice the following discipline & behavior management policy:

WE DO...

1. Praise, reward, encourage, and listen to children.
2. Reason with & set limits for the children.
3. Provide explanations related to the child's understanding.
4. Model appropriate behavior.
5. Provide natural & logical consequences for misbehavior.
6. Use short, supervised periods of time-out.

When children do not respond to positive behavior management strategies, parents will be notified and will be expected to work with program staff to encourage more appropriate behavior. For safety reasons, certain inappropriate behavior cannot be tolerated. The following are behaviors, which may result in a child's suspension or termination from the program:

AVOID...

1. Hurting others or self.
2. Leaving designated area without permission.
3. Running away from staff.
4. Destruction of property.
5. Repeated cursing or profane language.
6. Threatening violence.
7. Jeopardizing the health or safety of others.

If such misbehaviors occur, parents will receive a disciplinary action notice, and will be expected to support and work with program staff in order for a child to return to the program.

DISCIPLINE OCCURRENCES/CONSEQUENCES:

- Verbal Warning from the counselor and/or Site Director
- Discipline report written by the counselor or Site Director
- May or may not have a follow-up call to parent/guardian by Staff
- Camp suspension for 1-5 days, staff will speak with parents/guardians
- Meeting with camper's parent/guardian
- Camp suspension for 1-10 days, staff will meet with parents/guardians
- Meeting with Program Supervisor of Summer Playground/Teen Program
- Camper removed from camp
- No refunds are given for youth removed from program due to discipline issues

I, the undersigned parent/guardian of _____ (Child's full name), have received and read the Discipline & Behavior Management Policy for Asheville Parks and Recreation Department's youth program at _____ (Site Name). The program staff has discussed the policy with me, and answered any questions I might have about this policy. I agree to abide by this policy as a condition of my child's enrollment in the youth program, and will discuss the basic rules of behavior with my child.

Signature of Parent

Date

Staff

PHOTO RELEASE FORM

I, _____ (parent's name), grant permission to the City of Asheville and its legal representatives and assigns, the irrevocable and unrestricted right to use, publish and broadcast my photograph(s), likeness and voice for trade, advertising, and any other purpose and in any manner and medium; and to alter the same without restriction. I hereby release the City of Asheville and its legal representatives and assigns from all claims and liability relating to said photograph(s), likeness and voice.

Signature: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

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If subject is under 18:

Participant's Name: _____

I, _____ (print name), am the parent/legal guardian of the individual named above, I have read this release and approve of its terms.

Signature: _____

Date: _____