



Hangin' at the Haven - Afterschool Program

Norwalk Parks & Recreation & First Baptist Church of Norwalk

Main Street School Students Only

Location: Haven, 5 N. Foster Street, Norwalk

Tuesdays & Thursdays, starting October 10, 2019

Hours: 3:00 - 5:00 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 an emergency contact other than those listed above:

Contact #1: _____ Relationship: _____
 Home/Cell #: _____ Work #: _____

MEDICAL CONCERNS/ALLERGIES:

All students MUST COMPLETE A REGISTRATION FORM before being permitted to attend the HANGIN' AT THE HAVEN After School Program. Completed forms can be turned in to the program staff of HANGIN' AT THE HAVEN on their first day.

- There is NO SET REGISTRATION PERIOD, students are permitted to start the program any time during the program period - Tuesdays & Thursdays, beginning October 10th.
- The program will be canceled on ANY day that the Norwalk City School District is not in session or otherwise announced per Main Street School.
- The participants will have a choice to skate or make a healthy snack with Ms. Susan each day, provided by the SNAP-ED program, OSU Extension. Concessions will be available as well for purchase.

EMERGENCY MEDICAL RELEASE & HOLD HARMLESS RELEASE

If emergency medical care is necessary and I cannot be reached, I authorize the Norwalk Parks & Recreation and First Baptist Church 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 First Baptist Church of Norwalk, The City of Norwalk, the Norwalk Parks & Recreation Department, and any other organizing party, it's directors, officers, organizers, sponsors, supervisory staff, participants, volunteers, 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 First Baptist Church of Norwalk, 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 First Baptist Church and 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 First Baptist Church of Norwalk and the Norwalk Parks & Recreation Department and its employees will not use these materials for compensation.

Name of Student

Name of Parent/Legal Guardian (please print)

Date

Signature of Parent/Legal Guardian

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TRANSPORTATION INFORMATION

Students must not leave prior to our 5:00 dismissal time, unless prior arrangements have been made and parent/guardian has notified staff by note or in person.

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 Haven at the dismissal time of 5:00pm.

CHECK OUT AUTHORIZATION

Student's Name: _____

The following individuals are authorized to check-out the above-named student from Hangin' at the Haven After School Program.

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

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

Parent/Guardian Signature: _____ Date: _____

STUDENT CODE OF CONDUCT

The Haven is a safe place for students to come and learn and have fun. The following are expected of each participant:

- Respect yourself and others and their property. Do not take something that doesn't belong to you.
- Play fair, be honest, and say only good things about and to others. Applaud the efforts of others.
- Inappropriate language, bullying, harassment, tobacco, drugs, alcohol, and weapons are prohibited.
- Eat and drink in designated areas only.
- Follow instructions & listen during appropriate times.
- Take care of the facility, grounds, and equipment. If you make a mess, you clean it up.

Violation of this Student Code of Conduct may lead to temporary or permanent suspension from the program.

Student Signature

Parent/Guardian Signature

Date

