

Town of Portland Kids Blast Program

I. Registration

- 1) Must be enrolled in Portland Schools or be a resident of Portland Grade K to 6 or other student approved by Youth Services Director
- 2) Must have updated PE sheet signed by M.D. as accepted by Portland Schools
- 3) Registration form must be completed and returned to the **Portland Youth Services** office at 265 Main St. by August 1. Applications received after August 1st that child will be placed on a waiting list. Registration fee of \$20.00 must accompany application. Fee for 1st month of program must also accompany application. All payments are due by the 15th of the month; \$20.00 late fee will be added. 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.
- 4) Registration is on a set weekly basis. No change of schedule is allowed without Directors approval.
- 5) Only people listed on application will be allowed to pick up children, identification will be required.
- 6) Court order must be provided for people that are listed as not being allowed to pick up children registered in the program.
- 7) Alternate bus route form must be filled out by July 1, 2009 and returned to your child's school office.

II. Program Fees (all are listed as per day fees) Checks are to be made out to The Town of Portland. If Financial Assistance is needed Town of Portland's Financial Assistance Application must be filled out. Forms are available from Youth Services or on line.

Session	5 Day Participant	Sibling	1 to 4 Day Participant	Sibling
Before School Care	\$ 9.00	\$8.00	\$10.00	\$9.00
Before School Kindergarten A.M.	\$15.00	\$14.00	\$16.00	\$15.00
After School Kindergarten P.M.	\$15.00	\$14.00	\$16.00	\$15.00
After School Care	\$15.00	\$14.00	\$16.00	\$15.00

A.M. & P.M. KINDERGARTEN, 15 MINIMUM ENROLLMENT NEEDED.

NOTE:

- *Fees paid for days registered regardless of attendance.
- *Two week notice required if child will not attend program due to vacation.
- *Strict 6:00 P.M. pick up time. \$10.00 will be charged for 1st offense, \$20.00 2nd offense, 3rd offense child/children will no longer be registered in the program.
- *Parents **must** call Youth Services or Kids Blast by noon to notify program that child will not attend for the day continued violation will jeopardize your child's position in the program.

III. Program Schedule

- 1) Program to be held at Brownstone Intermediate School
- 2) Will follow Portland School calendar
- 3) Will not be open on Board of Education approved Holidays or vacations.

IV. Late opening/Snow Day policy

1) Late opening

- a) Only children registered for B-4 school on day of late opening qualify
- b) Children may arrive at 9:00 A.M.

2) Early School Dismissal

- a) On days on school calendar listed as early closing, holiday etc. Students arrive at school dismissal time or at arrival of bus to program and will be picked up at their normal departure time.
- b) On days of early dismissal due to weather students arrive at program and need to be picked up no later than 5:00
- c) On days of early dismissal due to weather that the state and town close, parents will be notified and must pick their children up immediately within one hour.

3) Snow Days

No program on those days / no charge for that day

V. Daily Program Structure

- 1) Attendance taken
- 2) Free time till all arrive
- 3) Wash Hands
- 4) Snack Time
- 5) Homework and or Reading time for all
- 6) Asset building activities/crafts/outside play time weather permitting upon completion of homework.
- 7) Go Home

After School Council

For school-agers, the ability to help design their environment and have choices in their after-school program is important. The after school council encourages children to work toward common goals by choosing weekly activities together. Your child will learn to be a decision maker who not only will shape his or her after school program, but will also learn and develop leadership and team asset building skills.

Whether your child prefers to work independently or in a small group, there will be diverse activities during the scheduled time for them to participate in at their own age level.

Portland Youth Services
P.O. Box 71, 33 E. MAIN STREET;PORTLAND,CT 06480
TEL#(860)342-6758

Kids Blast Program 2009-10 Application

I give my child permission to participate in the Town of Portland's After School program located at Brownstone School on the following days:

Monday_____ Tuesday_____ Wednesday_____ Thursday_____ Friday_____

Before School Care_____ Before School Kindergarten A.M._____

After School Kindergarten P.M. _____ after School _____

PLEASE NOTIFY YOUTH SERVICES OFFICE OR KIDS BLAST BY 12:00 IF YOUR CHILD WILL BE ABSENT.

YOUTH'S NAME_____ AGE_____ DATE of BIRTH_____ SEX _____

MOM'S NAME_____ DAD'S NAME_____

MOM'S WORK TEL.#_____ DAD'S WORK TEL.#_____

CELL PHONE_____ CELL PHONE _____

YOUTH'S SOCIAL SECURITY # _____

ADDRESS_____ HOME TEL.# _____

SCHOOL IN SEPT _____ GRADE_____

THE FOLLOWING INFORMATION IS FOR EMERGENCY USE;

CHILD'S/YOUTH'S HEIGHT_____WEIGHT_____

EYE'S COLOR_____HAIR COLOR_____

AMERICAN CITIZEN () NON-AMERICAN CITIZEN () :

CAUCASIAN/WHITE () AFRICAN AMERICAN () HISPANIC/LATINO ()

ASIAN () NATIVE-AMERICAN () MULTIRACIAL ()

IF OTHER, PLEASE STATE () _____

ARE THERE ANY SPECIAL MEDICAL NEEDS? YES_____NO_____

IF YES, THEN PLEASE EXPLAIN ON SEPARATE SHEET. PLEASE DATE, SIGN, AND ATTACH.

NAME OF FAMILY'S INSURANCE CO. & POLICY #

NAME OF CHILD'S/YOUTH'S
PHYSICIAN _____ TEL.# _____

Emergency Contact Information

Name _____ Phone _____

Please list anyone who **has** permission to pick up your child

Please list anyone who **does not** 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 Youth Services provides this program. (I) (we) do hereby release, discharge indemnify and hold harmless, Portland Youth Services/Portland Park & Rec and the Portland School System, employees 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 Youth Services employees or agents.

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 Youth Services staff and or responding Emergency Medical Personnel to treat my child on scene and transport via ambulance or other appropriate means if deemed necessary.

My child is in good health and has my permission to participate in this program and on field trips. I understand that various activities present a risk ie. Playscape activities.

Signature _____
(Parent or Guardian) (Please print name)

Date _____