



High Point Parks & Recreation Department
 136 Northpoint Avenue,
 High Point, NC 27262
www.highpointnc.gov/pr

High Point Parks & Recreation After School Program 2011 – 2012 School Year

Our After School Program was designed with ***your*** child in mind!

Sure, you want your children to enjoy their afternoons, but you also want to know they are safe and secure, while having fun as they make new friends and gain new skills.

Our enrichment programs provide group and individual games, as well as athletic activities, arts and crafts, new experiences, field trips, special events and much more!

Most importantly, our counselors are chosen for their responsibility, energy, patience and concern for your child's welfare. Our skilled staff is professionally trained and eager to help your child meet his or her richest potential.

Registration

- For 2010-2011 After School Members - June 20 - July 1, 2011
 - For 2011 Summer Day Camp Members - June 20 - July 1, 2011
 - Open Registration and Waiting List* - Begins July 5, 2011
- (During hours of operation at all centers)

Registration will be taken at the individual centers according to the registration schedule. The first month's fee and an Immunization Form are required for registration of each After School Program member. Registration is limited at each facility. We suggest that you contact the facility of your choice to check availability before submitting a registration form.

*A waiting list will be taken at facilities that reach maximum enrollment.

INCLEMENT WEATHER POLICY:

When Guilford County Schools are closed for the day due to bad weather/icy conditions, the After School Program **will not** operate at any time during the day at any Recreation Center.

On days when Guilford County Schools let out early due to inclement weather (snow, ice, freezing rain), Parks and Recreation **will not** pick up or have the After School Program. The Recreation Centers will be closed to childcare that afternoon. The schools have been notified that on these days of early dismissal due to inclement weather, the children will be picked up by their parent/guardian at the school at the appropriate time.

About the After School Facilities...

The After School Programs are based at the Allen Jay, Oakview, Deep River and Morehead Recreation Centers. The program also utilizes many City parks, tennis courts, softball/soccer fields, and playground areas.

Allen Jay Recreation Center
1073 E. Springfield Road
883-3509

Days: Monday - Friday
Time: 2:30 - 6:00 p.m.
Grades: K-5
*Fee: \$125.00 per month
*Activity Fees Additional

Oakview Recreation Center
503 James Road
883-3508

Days: Monday - Friday
Time: 2:30 - 6:00 p.m.
Grades: K-5
*Fee: \$125.00 per month
*Activity Fees Additional

Morehead Recreation Center
101 Price Street
883-3506

Days: Monday - Friday
Time: 2:30 - 6:00 p.m.
Grades: K-5
*Fee: \$125.00 per month
*Activity Fees Additional

Deep River Recreation Center
1529 Skeet Club Road
883-3407

Days: Monday - Friday
Time: 2:30 - 6:00 p.m.
Grades: K-5
*Fee: \$125.00 per month
*Activity Fees Additional



SNACK:

Snack machines containing crackers, chips, drinks, etc., ranging from \$.50 - \$1.25 are available. Please bring correct change.

CLOTHING:

Members should wear clothing suitable for activities. Tennis shoes are required. After School members' names should be written on all items brought to the Recreation Center. Do not bring valuables such as electronic games, radios, cell phones, jewelry, etc. Money should be kept on person or in a secure place.



High Point Parks & Recreation will not be held responsible for lost, stolen or damaged personal items

FEES:

One month's fee for all children will be due at time of registration. Monthly fees are due on the 23rd of each month preceding the child's attendance. If you find that your child(ren) will be unable to attend during any month, you must notify the After School Program Director, *in writing*, five business days in advance. Failure to do so will result in the regular monthly charge for your child(ren). If an emergency arises and your child(ren) will not be attending the After School Program as planned, you must notify the After School Program Director as soon as possible. You may be required to provide proof of any such emergency.

A \$5 late charge per child will be charged for every fifteen minutes after the designated pick-up time that children remain at the Center. In the event of an emergency which may cause late pick-up, please call the After School Program Director before 6:00 p.m.

An all-day program will be offered to parents on days that school is closed. A minimum of fifteen participants is required to operate the program.

The After School Application



Please check applicable ASP site:

- Allen Jay Recreation Center
- Morehead Recreation Center
- Oakview Recreation Center
- Deep River Recreation Center

(Please Print All Information Clearly)

Member's full name _____ Birth Date _____ Age _____ Grade & School (2011-2012 School Year) _____

Home Address _____ City _____ Zip _____

Mother's Name _____ Home Phone/Other _____ Employer _____ Work Phone _____

Father's Name _____ Home Phone/Other _____ Employer _____ Work Phone _____

Emergency Name (Other than Parent) _____ Home Phone _____ Work Phone _____

Emergency Name (Other than Parent) _____ Home Phone _____ Work Phone _____

Person(s) authorized to pick up child(ren) other than parents _____

Are there any physical/emotional conditions, special needs, medications, or any other general information about which we need to be informed? No Yes

Photographic Consent: I do I DO NOT (check one) give permission to have my child appear in any media coverage approved by the High Point Parks & Recreation Department. I understand that the Facility Director, in conjunction with the Recreation Supervisor, has been given the authority to determine appropriate requests.

Signature of Parents/Guardians: X _____
X _____

Both parents/guardians must sign. If not, state reason _____



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Parental Consent to Administer Medication:

We, the undersigned parents/guardians of the below named child(ren), request that the medication we have delivered to the named facility be administered in the following manner: **(Please Print All Information Clearly)**

Child's Name	Name of Medication
Dosage	Reason to be given
Time to be given	Days to be given

This medication was delivered to the above named facility in the original container and was prescribed by:

Physician's Name	Physician's Address	Physician's Telephone
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Parent's Signature: _____ Date: _____

Discipline Policy: (We do not use corporal punishment!)

1. Verbal warning
2. Time-out (maximum ten minutes per infraction)
3. Extended Time-out (write up)
4. Parent notification with possible revocation of field trip privilege(s), or immediate parent pick-up
5. Suspension
6. Expulsion

I have received a copy of the After School Program Handbook and agree to adhere by it.

Waiver: I certify that my child is able to participate and hereby give my approval for the above-named child(ren) to participate in any and all After School Program activities including swimming. I assume all risks and hazards incidental to such participation including transportation to and from all activities, waive and release any and all rights and claims for personal injury and otherwise which I may have against the High Point Parks & Recreation Department, representatives and successors, for any and all claims of liability. In the event of any emergency, if staff is unable to contact me, I hereby release authorization for medical treatment.

Parent's Signature/Date: _____

One month's fee must accompany *completed* After School application.



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**High Point Parks & Recreation
After School Program**

IMMUNIZATION FORM
For Children Under 18 Years of Age

Every After School participant must provide verification of current immunization records. This form can:

- A. be signed by a school principal, a doctor, or a representative of the Health Department.

or

- B. be attached to a copy of the participant's immunization record.

This is to verify that _____ has current immunization records on file in my office.

Signature

Title

Date

This form must be completed and returned two weeks before the first day of participation in the After School Program.