CITY OF SANTA FE
Community Services Department
2014 After School Program
Monica Roybal Youth Center

Please print. **One registration form per child**

OFFICE USE ***(This portion to be completed by Monica Roybal Division Staff.)***		
SCHOOL ATTENDING:	WAITING LIST:	PROCESSED BY:

CHILD'S INFORMATION					
NAME OF CHILD					
ADDRESS				ZIP	
DATE OF BIRTH		AGE		SEX	Male Female

PARENT'S INFORMATION			
MOTHER'S NAME		HOME PHONE #	
ADDRESS		WORK PHONE #	
EMPLOYER		CELL PHONE #	
FATHER'S NAME		HOME PHONE #	
ADDRESS		WORK PHONE #	
EMPLOYER		CELL PHONE #	

EMERGENCY INFORMATION			
Name two (2) relatives or friends in Santa Fe to act on your behalf (or to pick up your child) in case parents cannot be reached.			
NAME		RELATIONSHIP	
ADDRESS		PHONE NUMBER	
NAME		RELATIONSHIP	
ADDRESS		PHONE NUMBER	
The name and phone number of the doctor who treats your child.			
NAME		PHONE NUMBER	
HOSPITAL		PHONE NUMBER	

Does your child currently take medication? Yes No	*If yes, what?*		

Does your child have a medical condition such as epilepsy, which we should be aware of? If yes, please describe:

Does your child have a disability, which will require special accommodation? If yes, please describe:

Does your child have any allergies? Yes No	*If yes, describe:*		

Care instructions for any conditions marked YES.

Date of Last Tetanus Shot:	

PERMISSION FOR EMERGENCY CARE

I hereby authorize the Community Services Department/Monica Roybal Youth Center staff to take my child to the physician or hospital named above for medical treatment in the event of an emergency, if neither my spouse nor I can be reached. I also authorize any licensed physician or medical treatment center to treat my child in case of an emergency in which the above named physician cannot be reached.

SIGNATURE		**DATE**	

OVER

RELEASE OF LIABILITY

I, or we, as the legal parent(s) or guardian(s), of the registered child do hereby agree to release, hold harmless and forever give up any claim against the City of Santa Fe that may arise in the future for damage on account of bodily injury or property damage in any manner out of participation in the After School Program. I understand that by signing this form, I have waived my legal right to attempt to hold the City responsible, and I fully understood when providing my signature on the program application that I waived such rights. I, or we, have read and acknowledge all conditions as set forth in this document.

SIGNATURE		**DATE**	

PARENTAL AGREEMENT

1. If anyone other than the parents will be picking up your child, you must be provide the City with a written authorization and the name of the individual(s).
2. Children will not be allowed to leave the site on their own. For children who do leave the site, staff has been directed to immediately advise the parents. Children will be subject to suspension or expulsion from the program should they leave the program without formal authorization from parents or legal guardians.
3. Parents will be required to sign a permission slip when their child is going on field trips or to watch movies or videos.
4. The City will not be responsible for the theft or damage to personal equipment or toys brought to the program site by children.
5. Children who do not adhere to rules and regulations of the program, will be subject to suspension or expulsion from the program, depending on the severity of the incident.
6. Children will be responsible for the care and use of the program equipment. Children who abuse or damage the equipment or property will be subject to suspension or expulsion from the program and any damages will be assessed to the parents.
7. Parents must notify the site supervisor if their child will not be attending in order to be excused. Children with three (3) **unexcused** absences will be dropped from the program and that slot will be immediately filled with a child from the waiting list.
8. If your child becomes ill at home (e.g., with a cold or flu), that can infect other children. **Do not** bring the child to the Monica Roybal Youth Center. Parents will be notified to take their child home should the child arrive ill or become ill during the program.
9. Program staff are prohibited from administering any medications to children. This is solely the responsibility of parents.
10. Photographs, video and/or general information may be published in, or used by, any of the media or mass communication (including newspaper, magazines, television, pamphlets, etc.).
11. All parents must provide their signature acknowledging the Rules and Regulations of the After School Program prior to or at the time of registration.
12. No cell phones will be allowed on site. Children are able to access a phone at the Monica Roybal Youth Center if needed.

SIGNATURE		**DATE**	

CHILD PARTICIPANT RULES AND REGULATIONS

1. Fighting, abusive or foul language or racial teasing is not allowed and will not be tolerated.
2. Disrespectful acts towards staff will not be tolerated. Such acts will be subject to suspension and/or expulsion depending on the severity.
3. Children will not be allowed to leave the site unless the parent has provided special permission.
4. Safety rules will be enforced to prevent accidents or injuries. Engaging in any activity that could endanger the health and safety of your child and others will not be permitted.
5. Drugs and alcohol will not be allowed on or around site. Anyone under the influence of alcohol or drugs will not be permitted to remain on the premises and police will be called.
6. The City of Santa Fe After School Program will not be responsible for lost, stolen or damaged articles.
7. No fireworks will be permitted on site.
8. No eating or drinking will be allowed in the transportation vans or buses. Food fights will not be tolerated.
9. No types of weapons will be allowed at program sites. Violation of this rule will result in expulsion.

THE ABOVE RULES AND REGULATIONS WILL BE ENFORCED. DEPENDING ON THE SEVERITY OF THE OFFENSE, THE CHILD MAY BE SUBJECT TO SUSPENSION OR ASKED NOT TO RETURN TO THE AFTER SCHOOL PROGRAM.

DATE	AMOUNT PAID
7/25/14	
10/24/14	
1/23/15	