CITY OF SANTA FE
Community Services Department
2015 After School Program
Carlos "Carlitos" Ortega Teen Center

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

OFFICE USE ***(This portion to be completed by Carlos Ortega Teen Center Staff.)***

SCHOOL ATTENDING:	WAITING LIST:	PROCESSED BY:

CHILD'S INFORMATION

NAME OF TEEN					
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 teen) 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 teen.

NAME		PHONE NUMBER	
HOSPITAL		PHONE NUMBER	

Does your teen currently take medication? ☐ *Yes* ☐ *No* | *If yes, what?*

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

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

Does your teen 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/Carlos Ortega Teen Center staff to take my teen 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 teen 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 teen 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 teen, you must provide the City with a written authorization and the name of the individual(s).
2. Teens will not be allowed to leave the site without a parent or authorized individual. For teens who do leave the site, staff has been directed to immediately advise the parents. Teens 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 teen 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 brought to the site by the teen.
5. Teens 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. Teens will be responsible for the care and use of the program equipment. Teens 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 teen will not be attending in order to be excused. Teens with three (3) **unexcused** absences will be dropped from the program and that slot will be immediately filled with a teen from the waiting list.
8. If your teen becomes ill at home (e.g., with a cold or flu), that can infect others. **Do not** bring teen to the Carlos Ortega Teen Center. Parents will be notified to take their teen home should they arrive ill or become ill during the program.
9. Program staff is prohibited from administering any medications to teens. 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. Teens are able to access a phone at the Carlos Ortega Teen Center if needed.

SIGNATURE		DATE	

TEENS 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. Teens 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 teen 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 TEEN MAY BE SUBJECT TO SUSPENSION OR ASKED NOT TO RETURN TO THE AFTER SCHOOL PROGRAM.

DATE	AMOUNT PAID
7/31/15	
10/30/15	
1/22/16	