

August 2014 – June 2015

Dear Parent/Guardian,

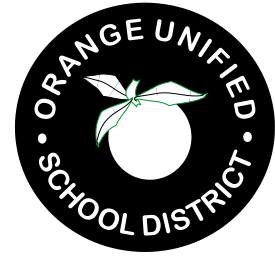
We are pleased to be working as your Afterschool Education and Safety (ASES) program again this year. The ASES program is a partnership with the Orange Unified School District, Esplanade Elementary and the YMCA of Orange.

The ASES program is accepting Registration Packets; however, program enrollment is based on current availability, approval from YMCA Site Director, and school administrator. Please submit your child's Registration Packet to the YMCA of Orange ASES Site Director.

If you have questions, please feel free to contact me.

Sincerely,

Edgar Guzman
Site Director
Esplanade Elementary
714-450-5527
eguzman@ymcaoforange.org

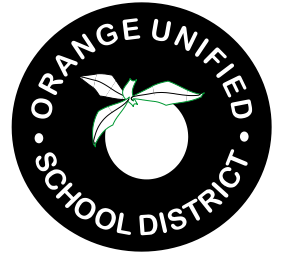


YMCA of Orange ASES POLICIES & ENROLLMENT CONTRACT

1. The YMCA of Orange/OUSD ASES program is a non-fee program provided Monday-Friday, immediately after school until 6:00pm. The ASES program will not operate on any OUSD Holidays, Non-School Days, or during breaks (winter, spring, summer). ASES is closed when school is closed.
2. Participants will be offered a snack every day, provided by the Orange Unified School District.
3. The YMCA of Orange is not responsible for any lost or stolen items. DO NOT allow your child to bring toys or items from home. These items will be taken away and returned to you when you pick up your child.
4. If a child shows any signs of illness, the parents will be contacted to pick up the child to prevent the spread of any illness.
5. Medication: If medication must be administered while your child is attending the YMCA of Orange ASES program, a "Medicine Authorization" form must be completed. NO MEDICATION WILL BE GIVEN BY THE STAFF WITHOUT THE COMPLETED AUTHORIZATION FORM. All medication must be in its original container, both over the counter and prescription, with the child's name indicated on the container.
6. The parent/guardian agrees to sign out his/her child with a full signature each day. Individuals who are authorized to sign out the child must be **at least 18 years old** with a government issued identification card and /or driver's license.
7. The YMCA of Orange ASES program closes promptly at 6:00pm. If your child has not been picked up by 6:20pm, the Director will call provided emergency contact numbers. If no one can be contacted and your child is not picked up by 6:30pm, the Orange Police department will be contacted to assist the YMCA of Orange. If a parent/guardian continues to be late to pick up their child, the YMCA of Orange ASES program reserves the right to withdraw the child from the program.

8. The parent understands that the Department of Social Services has the authority to interview children and/or staff, and to inspect and audit child or childcare center records, without prior consent. The Department has the authority to observe the physical condition of the child, including conditions that could indicate abuse, neglect or inappropriate placement.
9. Attendance: The ASES grant requires that the program stay open until 6:00pm and that child must attend the full extent of the program. Students may however leave the program early or arrive late for reasons outlined by the Early Release/Late Arrival policy. If the child accumulates three unexcused absences, it will result in an immediate withdrawal from the program unless the parent/guardian provides a note.
10. Behavior: Fighting, threats, and other forms of physical aggression, vulgarity, and/or lying will not be tolerated at the YMCA of Orange ASES program. All children will follow the Orange Unified School District school behavior policies. Students must arrive ready to learn and participate in the ASES program. Refusal to follow agreements listed above will result in a referral and consequences such as loss of enrichment time. In extreme cases of violence or disruptive behavior, a child will be removed from the ASES program.
11. Homework: It is the student's responsibility to make sure they have completed all of their homework. The YMCA of Orange ASES program is not responsible for students forgetting about or refusing to do their homework. **It is the parent/guardian's responsibility to ensure that all homework is completed, corrected and turned in.** The YMCA will work closely with the school faculty (teachers and teacher liaison) and administration to support all program members with academics. Students must arrive to the ASES program with all of their homework assignments and material needed to complete them.

Parents, please keep the enrollment contract pages for your records.



YMCA of Orange ASES PROGRAM

I/we have read, understand, and agree to the YMCA of Orange ASES Policies and Enrollment Contract.

Parent Signature

Date

Parent Signature

Date

Child's First and Last Name

Student ID Number

2014-2015 Teacher's Name

COMPLETED REGISTRATION FORMS CHECKLIST:

Check off by Parent

Check off by YMCA Director

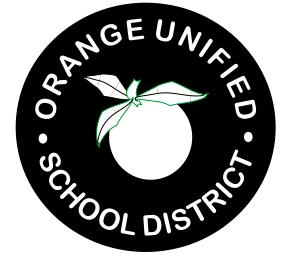
- Policies & Enrollment Contract Signature Sheet
- Late Arrival/Early Release Policy
- Identification & Emergency Information
- Consent for Medical Treatment
- Waiver of Liability and Indemnity Agreement

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-
-
-

YMCA Of Orange Staff Use Only:

Start Date: _____

Exit Date: _____



Late Arrival/Early Release Policy

The ASES grant requires that the YMCA Afterschool program stays open until 6:00pm and that children must attend the full extent of the program. Students may however leave the program early or arrive late for reasons outlined by the policy in writing in accordance with the conditions stated below:

8483. (a) (1) Every after school component of a program established pursuant to this article shall commence immediately upon the conclusion of the regular school day, and operate a minimum of 15 hours per week, and at least until 6 p.m. on every regular school day. Every after school component of the program shall establish a policy regarding reasonable early daily release of pupils from the program. For those programs or school sites operating in a community where the early release policy does not meet the unique needs of that community or school, or both, documented evidence may be submitted to the department for an exception and a request for approval of an alternative plan. [Ed Code 8483]
EC Section 8483(a)(2) It is the intent of the Legislature that elementary school pupils participate in the full day of the program every day during which pupils participate.

It is the intent of the California Legislature that elementary school students participate in the full day of the afterschool program every day during which that student attends school. If an elementary school student is unable to attend the afterschool program for the full day every day, the parent/guardian must complete and submit for approval a request for early release or late arrival specifying the days and hours the student will be released early and/or arrive late and the reason(s) for requesting early release/late arrival. Priority for enrollment will be given to the students who can attend the full day every day. Non-compliance with the attendance, late arrival and early release policy may result in disenrollment from the after school program. A child may be released early or arrive late to and from the after school program based on the following conditions:

- Family Emergencies
- Medical appointments
- Medical Emergency
- Inclement Weather
- Injury or illness.
- Religious purposes
- Counseling
- Parallel Programs- (at the discretion of the school and/or YMCA)
- Other situations reviewed on a case-by-case basis determined by the after school Directing staff and school.

I understand that The YMCA of Orange, and The Orange Unified School District will not be held responsible for my child while he/she is not present at their after school site and give my consent to this early release of my child.

Signature of Parent or Guardian

Date

YMCA of Orange

IDENTIFICATION AND EMERGENCY INFORMATION

Child's Name: Last Middle First Grade Sex/Gender Telephone
()

Address: Number Street City State Zip Code
Birthdate

Father's Name: Last Middle First Work Telephone Cell/Pager Telephone
() ()

Home Address: Number Street City State Zip Code Home Telephone
()

Mother's Name: Last Middle First Work Telephone Cell/Pager Telephone
() ()

Home Address: Number Street City State Zip Code Home Telephone
()

EMERGENCY CONTACTS AUTHORIZED TO PICK UP YOUR CHILD FROM ASES

NAME	ADDRESS	TELEPHONE	RELATIONSHIP

NAME OF PRIMARY CARE PHYSICIAN AND DENTIST

Physician: Address: Medical Plan and Number Telephone
()

Dentist: Address: Medical Plan and Number Telephone
()

I understand that it is my responsibility to inform the YMCA of any updates, changes, or corrections in any of the contact, authorizations, and/or emergency information

X _____
SIGNATURE OF PARENT OR GUARDIAN DATE

HEALTH HISTORY: (Check &/or give approximate dates) MUST BE COMPLETED

Frequent Ear Infections _____	Chicken Pox _____	Hay Fever _____	Measles _____
Sleep Walking _____	Bed Wetting _____	German measles _____	Poison Ivy _____
Heart Defect/Disease _____	Diabetes _____	Mumps _____	Insect Stings _____
Convulsions _____	Mononucleosis _____	Penicillin _____	Asthma _____
Other Drug Allergies: _____	Hypertension _____	Bleeding/Clotting Disorders _____	
Date of Last Tetanus Shot _____			
Date of last Booster Shot: _____			

Please list any disabilities, behavioral or psychological disorders or special health conditions of your child.

Other Immunizations & Dates: _____

Operations or injuries: _____

Dietary Modifications/allergies: _____

Any specific activities to be encouraged or limited by a physician's advice? _____

I understand that if my child is ill he/she must be kept home for his/her own sake and that of others. The YMCA cannot accept my child if he/she shows signs of illness upon his/her arrival or attendance in the program.

Parent's Initials _____

IMPORTANT: Please notify YMCA if the child is exposed to any communicable disease during and/or three weeks before or after his/her attendance in any program.

AUTHORIZATION AND CONSENT TO THE TREATMENT OF A MINOR

I/We, the undersigned parent(s) of

_____, a minor, do hereby authorize and consent to any x-ray, examination, anesthetic, medical or surgical diagnosis rendered under the general or special supervision of any member of the medical staff licensed under the provisions of the Medicine Practice Act or a dentist licensed under the provisions of the Dental Practice Act, and on the staff of any acute general hospital holding a current license to operate a hospital from the State Of California Department of Public Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment of hospital care being required but is given to provide authority and power to render care which the aforementioned physician in the exercise of his best judgment may deem advisable. It is understood that effort shall be made to contact the undersigned prior to or rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached.

This authorization is given pursuant to the provision of section 25.B of the Civil Code of California.

List any restrictions: _____

Signature of Parent or Legal Guardian: _____ **Date:** _____



YMCA of Orange Membership Application
Release and Waiver of Liability and Indemnity Agreement

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgment that such premises and all facilities and equipment therein and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED, ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releases") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned or such children in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releases or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releases or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.
4. THE UNDERSIGNED HEREBY GIVES PERMISSION for the YMCA of Orange to use any photographs or video footage taken of the undersigned and/or the undersigned's children participating in YMCA of Orange activities in future YMCA promotional purposes, without additional release or authorization.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ THIS RELEASE.

Signature of applicant/parent: _____ Date: _____

Print name of applicant/parent: _____

Print name(s) of child(ren) in program: _____