

# Community After School Program Registration Form 2021-2022



## Participant Information

Site: \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Preferred Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ If year-round school, provide Track # \_\_\_\_\_

I want Parks, Recreation and Cultural Resources to know about these medical conditions for the participant: \_\_\_\_\_

I want Parks, Recreation and Cultural Resources to know about these disabilities for the participant: \_\_\_\_\_

I request ADA accommodation for the disability/medical condition listed. Yes No

The City of Raleigh Parks, Recreation and Cultural Resources Department welcomes the participation of all individuals, including those with disabilities or special needs. We are committed to compliance with the ADA and will provide reasonable accommodations to facilitate participation in our programs. To ensure that reasonable accommodations are in place, program registration or accommodation request should be received at least two weeks prior to the start date of the program. For more information please contact Inclusion Services 919.996.2147

## Parent/Guardian Contact Information

Parent/Guardian \_\_\_\_\_ Relationship to Participant \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Relationship to Participant \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\*\* I authorize my child to walk home from the program at \_\_\_\_\_ pm. \_\_\_\_\_ Initials

## Emergency Contact and Release Authorization

Please list additional names other than the parent/guardian listed above, 16 or older, that are authorized to be contacted in case of an emergency and allowed to pick-up the participant. Authorized individuals will be required to show a picture ID. Please print all names.

Name \_\_\_\_\_ Relationship to Participant \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

◇ I authorize staff to disclose information about the participant's behavior and other activities at CAPs.

Name \_\_\_\_\_ Relationship to Participant \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

◇ I authorize staff to disclose information about the participant's behavior and other activities at CAPs.

Name \_\_\_\_\_ Relationship to Participant \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

◇ I authorize staff to disclose information about the participant's behavior and other activities at CAPs.

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## Non-Discrimination Policy

The policy of the City of Raleigh is, and shall be, to oppose any discrimination based on actual or perceived age, mental or physical disability, sex, religion, race, color, sexual orientation, gender identity or expression, familial or marital status, economic status, veteran status or national origin in any aspect of modern life. A participant alleging discrimination on the basis of any of the aforementioned areas may file a complaint with either the Director of Raleigh Parks, Recreation and Cultural Resources Department or the Office of Equal Opportunity, U.S. Department of the Interior, Washington, D.C. 20240.

## Photo/Media Policy

I acknowledge and agree that the City of Raleigh may take photographs and video of individuals or groups participating in programs and events and may use any photographs(s) and/or video taken of me or my child to publicize the program and for other City-related purposes.

## COVID-19 Risks/Release, Indemnity, and Agreement Not to Sue (April 2021)

The City of Raleigh has been forced to confront the potential dangers associated with the COVID-19 pandemic. The City's Parks, Recreation, and Cultural Resources (PRCR) Department remains committed to providing high quality programming. However, in order to comply with guidelines from the Centers for Disease Control (CDC) and other federal, state, and local public health agencies, the PRCR Department has implemented additional safety precautions to ensure that program participants and other PRCR Department staff will have a fun, exceptional experience.

The contents of this document supplement applicable program policies (including Camp Policies and School-Based Program policies), the Program Registration Form, and the online registration for participants who registered through RecLink at [parks.raleighnc.gov](https://parks.raleighnc.gov). Unless amended herein, all prior policies applicable to the program for which you have registered remain in effect. Please review the following information carefully to learn more about what the City is doing to maintain a healthy program environment and what participants (or their Parents/ Guardians, if applicable) should do before participating in the PRCR program for which you have registered.

### COVID-19 Risks

COVID-19 is a highly contagious and novel viral agent. Its transmission vectors are imperfectly understood, and it may be possible to transmit or become infected by COVID-19 despite strict adherence to guidelines prescribed by the CDC and other federal, state, and local health agencies.

Participants in Raleigh Parks programs will be in a group setting where they may come into contact with other program participants (instructors, coaches, campers, camp counselors, camp program staff, and camp program administrators, etc.). Many program activities will be conducted in a public community center setting. As a result, while PRCR Department staff will make reasonable efforts to adhere to the above-stated guidelines, participants in PRCR programs may be exposed to increased risk of transmission or infection of COVID-19 through various actions or interventions, including but not limited to contact with or proximity to one or more of the following:

- Other program participants, staff members, or administrators;
- The personal belongings of program participants, staff members, or administrators;
- Programming and activity materials including, but not limited to, markers, books, games, toys, recreational equipment, etc.; and;
- City of Raleigh community center fixtures and furnishings, including door knobs, chairs, tables, plumbing apparatus, light switches, etc.

I understand that participating in the recreational program selected involves risk of injury or illness. These risks include, but are not limited to, inclement weather, accidents while traveling, food related illness, equipment problems or failures, contact with and actions of other participants, spectators, and volunteers, slips/ trips/falls, musculoskeletal injuries, exposure to and illness from infectious diseases, and any and all risks described in the preceding section. I choose for myself or for my child to participate in the selected programs despite the risks. By signing below, I acknowledge all risks of injury, illness, death, and property damage, and affirm that I have assumed all responsibility of injury, illness, or death in any way connected with participation in the program. I also agree for myself and for any child participant to follow all rules and procedures of the program and to follow the reasonable instructions of the counselors, staff members, and supervisors of the program.

By signing below, I acknowledge that I have read, understand, and agree to the City of Raleigh policies listed on this form and in the Raleigh Community Afterschool Programs Parent/Guardian Manual. Signature is required to complete the registration process.

Parent/Guardian Name (Printed) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_